

IN THE UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF OHIO  
EASTERN DIVISION

~~~~~

DEBORAH MOSS,

Plaintiff,

vs.

Case No. 1:18-cv-02257

UNIVERSITY HOSPITALS

AT PARMA MEDICAL CENTER,

Defendant.

~~~~~

Deposition of

DEBORAH A. MOSS

April 8, 2019

10:00 a.m.

Taken at:

Giffen & Kaminski

1300 East Ninth Street, Suite 1600

Cleveland, Ohio

Cynthia Sullivan, RPR

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1           DEBORAH A. MOSS, of lawful age, called  
2           for examination, as provided by the Federal  
3           Rules of Civil Procedure, being by me first  
4           duly sworn, as hereinafter certified, deposed  
5           and said as follows:

6                   EXAMINATION OF DEBORAH A. MOSS

7           BY MR. BULEA:

8                   Q.       Could you please state your name  
9                   for the record.

10                  A.       Deborah Ann Moss.

11                  Q.       How would you like me to address  
12                  you today?

13                  A.       Debbie.

14                  Q.       Debbie, is there any reason that  
15                  you are not able to answer my questions  
16                  truthfully today?

17                  A.       No.

18                  Q.       You have filed a lawsuit against  
19                  University Hospitals alleging disability  
20                  discrimination, correct?

21                  A.       Correct.

22                  Q.       The medical condition that forms  
23                  the basis for those claims is Stargardt  
24                  disease; is that correct?

25                  A.       Yes.

1           Q.     The Stargardt disease manifests  
2     itself primarily in the form of a vision  
3     impairment; is that right?

4           A.     Yes.

5           Q.     Are there any other ways in which  
6     it manifests itself?

7           A.     No.

8           Q.     Other than the vision impairment,  
9     are there any other medical conditions or  
10    impairments that form the basis of your claims  
11    in this lawsuit?

12          A.     No.

13          Q.     When were you diagnosed with  
14    Stargardt disease?

15          A.     I believe when I was 18.

16          Q.     Is that a progressive condition?

17          A.     Correct.

18          Q.     So if you could, describe for me  
19    the progression of the vision impairment from  
20    your diagnosis until today, please.

21          A.     It's been a slow progression. It's  
22    not to lead to total blindness. It's just the  
23    loss of central vision. So, for example, I  
24    guess, you know, initially being able to read  
25    the old film strips, you know, on the wall and

1       then not being able to do that.

2               Q.       Okay.

3               A.       Having to write things in larger  
4       print. At one point being able to read larger  
5       print books and then being no longer able to do  
6       so.

7               Q.       Is the vision impairment still  
8       progressing?

9               A.       I don't believe so.

10              Q.       Around what time did the vision  
11       impairment fully progress to the state it's in  
12       now?

13              A.       That's hard to say.

14              Q.       A rough guess? I mean, has it been  
15       the same for the last year? Two years? Five  
16       years?

17              A.       According to my doctor, there  
18       hasn't been many changes over the last several  
19       years.

20              Q.       Who is your doctor for the  
21       Stargardt disease?

22              A.       Elias Traboulsi.

23              Q.       When did you start treating with  
24       Dr. Traboulsi?

25              A.       I would say probably at least ten

1 years ago.

2 Q. I'm sorry. I've already forgotten  
3 your answer. You said according to  
4 Dr. Traboulsi there hasn't been any worsening  
5 of the progression in the last few years did  
6 you say?

7 A. At least the last five.

8 Q. Could you tell me then for the last  
9 five years how the vision impairment, the loss  
10 of central vision, has impacted your daily  
11 life, and I guess first we'll start with your  
12 life at home outside of the workplace.

13 A. Well, mine, it's pretty much been  
14 the same. I guess that's a very open or broad  
15 question.

16 Q. Sure. I guess what I'm looking for  
17 is if you could tell me how the loss of central  
18 vision limits you in any way. Are there  
19 activities that you can't perform or you need  
20 assistance with in your home life?

21 A. I mean, it's been the case, you  
22 know, ever since I was young. You know, you  
23 can't drive.

24 Q. Are you able to, for example, cook?

25 A. Oh, sure. I do everything most

1 people do.

2 Q. Other than driving, any other  
3 activities that you can think of that you're  
4 unable to do at all?

5 A. No.

6 Q. I want to limit it to your life  
7 outside of work, but are there any activities  
8 at home as far as cooking or cleaning or  
9 getting dressed or ready for the day that you  
10 use accommodations or need help in completing?

11 A. No.

12 Q. I know you can't drive, so are  
13 there other means of transportation that you  
14 use to get from place to place?

15 A. Family or friends or hiring  
16 drivers.

17 Q. Do you use public transportation?

18 A. It's not accessible to my area, but  
19 if need be I would be able to.

20 Q. When you say not accessible, you  
21 mean it's simply not offered?

22 A. I'm not on a route. There are no  
23 routes close.

24 Q. Where do you live?

25 A. Hinckley. What routes used to be

1 closer are no longer in existence.

2 Q. Could you tell me, I know you said  
3 there is a loss of central vision, but could  
4 you describe for me in a little more detail  
5 what you mean by that?

6 A. Well, I mean, it's hard to  
7 describe. I guess I often tell people if they  
8 wear glasses and don't have them on, that's  
9 probably how I see. My eyes tend to shift over  
10 so that I can see better utilizing the  
11 peripheral vision.

12 Q. So am I correct then it's not a  
13 total blindness, but it's blurriness in the  
14 central vision; is that accurate?

15 A. I don't know if it's so much  
16 blurriness. It's just I guess the detail isn't  
17 there.

18 Q. Are you able to see the detail in  
19 your peripheral vision?

20 A. To an extent.

21 Q. The central vision impairment, is  
22 it better or worse if you're looking at  
23 something close up as opposed to far away, or  
24 does it stay the same?

25 A. I guess it would be probably the

1 same. I mean, if I'm closer I can see things  
2 better than further away.

3 Q. But there is no point where if you  
4 bring something close enough to you that you'll  
5 be able to see it clearly; is that right?

6 A. I'd be able to see it better.

7 Q. So for the peripheral vision, and  
8 I'm not sure how else to ask this, are you able  
9 to see, for example, the court reporter better  
10 than you could see me?

11 A. I can see bodies and, yeah, a  
12 little bit of her face and head.

13 Q. Just so I can get an understanding,  
14 would you be able to, for example, tell the  
15 court reporter's facial expressions better than  
16 mine or about the same?

17 MS. WHITE: For the clarity of the  
18 record, can we state distances?

19 MR. BULEA: Sure. The court  
20 reporter is probably 5 feet to my left or your  
21 right.

22 A. No. I can't see her facial  
23 expression. It looks like she's just doing her  
24 job.

25 Q. I'm just trying to get an

1 understanding of what central vision is as  
2 opposed to peripheral. I guess I'm trying to  
3 get an understanding of what from your  
4 periphery could you see better than central,  
5 and I don't know if I'm asking that question  
6 very well.

7 A. Right. It's just there is so much  
8 to see that you can't really pinpoint it to  
9 narrow it down.

10 Q. I know you said that you can't see  
11 facial expressions. Are you able to see  
12 movement?

13 A. Yes.

14 Q. Are you able to discern whether  
15 someone is moving their hands, arms, head, or  
16 is it just general movement you can see?

17 A. It would depend on the distance,  
18 but in most cases I would be able to.

19 Q. Are you currently employed?

20 A. Yes.

21 Q. Where are you currently employed?

22 A. Holy Family Daycare.

23 Q. How long have you worked there?

24 A. A year.

25 Q. Since April of 2018?



1           A.       Correct.

2           Q.       Who is your supervisor there?

3           A.       Renee, and I can't think of her  
4 last name off the top of my head. I know it  
5 starts with a B.

6           Q.       What is your job for Holy Family  
7 Daycare?

8           A.       Caring for infants under 18 months.

9           Q.       What are your hours?

10          A.       They vary. If I get to work and  
11 just lately they have gone from 8:00 to 2:00,  
12 but previously it's been 9:30 to 1:00, and that  
13 hasn't always been every day.

14          Q.       Is the 8:00 to 2:00, and just for  
15 the record, that's 8:00 a.m. to 2:00 p.m., is  
16 that something you've been working every day?

17          A.       For the most part for the last week  
18 except for last Wednesday when they called me  
19 off. It depends on the number of kids. There  
20 is a staff-to-kid ratio.

21          Q.       What is the ratio?

22          A.       It could be either one to four or  
23 one to five.

24          Q.       Where is Holy Family Daycare  
25 located?

1           A.       In Parma.

2           Q.       I know you said your job was caring  
3 for infants. Do you have a job title?

4           A.       Infant co-teacher.

5           Q.       Does Holy Family have written job  
6 descriptions?

7           A.       I'm sure they do.

8           Q.       Have you ever seen yours?

9           A.       No.

10          Q.       Have you ever been provided with a  
11 job description?

12          A.       No.

13          Q.       Could you please describe for me a  
14 typical 8:00 a.m. to 2:00 p.m. work shift at  
15 Holy Family Daycare?

16          A.       It can consist of feeding the kids  
17 either bottles or food on a plate depending on  
18 their age, playing with them, preparing them  
19 for lunch, washing hands. Then if there is any  
20 extracurricular activities, we do those with  
21 the kids. If there is like a trike-a-thon or  
22 taking them out for a stroller ride or the  
23 petting farm.

24          Q.       Do you work in a classroom, or I  
25 guess is there separate rooms for the groups?

1           A.       Yes.

2           Q.       I'm sorry. Let me just start that  
3 over. Is there separate rooms for each group  
4 of four to five infants under the age of  
5 18 months that you care for?

6           A.       No. The young infants are in one  
7 room, and the older infants are in another  
8 room.

9           Q.       Are you always in the young infants  
10 room?

11          A.       I was up until last week, and they  
12 have had a change in their census, so they  
13 moved me up to the older infants.

14          Q.       So what is the age range of young  
15 infants and old infants?

16          A.       Young infants is six weeks to  
17 generally a year, and older infants is  
18 generally a year to 18 months.

19          Q.       So up until a week ago you had  
20 worked in the young infants room?

21          A.       Correct.

22          Q.       How many young infants are in that  
23 room?

24          A.       They can hold up to ten, but they  
25 are now down to four.

1           Q.     Is the move down to four, is that  
2     why you've been moved over to the older infants  
3     room?

4           A.     Correct.

5           Q.     Was there ever a time where you  
6     were responsible for working the young infants  
7     room by yourself?

8           A.     It would only be for brief periods  
9     of time.

10          Q.     How brief?

11          A.     Probably up to five or ten minutes.  
12     I'm not the main teacher.

13          Q.     Is there one main teacher for each  
14     room?

15          A.     Correct.   Yes.   There is a lead  
16     teacher.

17          Q.     So I take it then you're not the  
18     lead teacher for the older infants, either?

19          A.     Correct.

20          Q.     You're doing a good job, but I  
21     should have said this before.   Just do your  
22     best to let me finish my question before you  
23     answer so that the court reporter can get it  
24     down.

25          A.     Sure.

1           Q.     Are you receiving any  
2 accommodations at Holy Family Daycare?

3           A.     No.

4           Q.     Do you have any responsibility for  
5 documenting or reporting a child's daily  
6 activities for the family?

7           A.     No. That's the lead teacher's  
8 responsibility.

9           Q.     For the older infants room, is  
10 there also up to ten children at any given  
11 time?

12          A.     Up to eight.

13          Q.     So are you and the lead teacher the  
14 only two employees in that room?

15          A.     No. There could be others that  
16 swap in and out, but there would only be two  
17 people in there, one to two at a time.

18          Q.     I know it's only been a short time,  
19 but is it also the same that you would not be  
20 working in the older infants room by yourself  
21 other than for brief five- to ten-minute  
22 periods at a time?

23          A.     Correct.

24          Q.     Is there only the lead teacher now  
25 in the young infants room?

1 A. Yes.

2 Q. What is your rate of pay at Holy  
3 Family?

4 A. \$9.50.

5 Q. Do you receive any benefits?

6 A. No.

7 Q. Do you currently have health  
8 insurance?

9 A. Yes.

10 Q. Where did you get that from?

11 A. My husband's.

12 Q. His employer?

13 A. Yes.

14 Q. What is your husband's name?

15 A. William.

16 Q. Same last name, Moss?

17 A. Correct.

18 Q. Where is he employed?

19 A. Parma City Schools.

20 Q. How long have you been on the  
21 health insurance through the Parma City  
22 Schools?

23 A. Since January of '18.

24 Q. You had health insurance through  
25 University Hospitals through December of 2017;

1 is that correct?

2 A. Correct. My husband's employer  
3 states that if a spouse is offered it through  
4 their company, they have to take it even though  
5 it doesn't cost any more for me to go back on  
6 his plan.

7 Q. So that was going to be my next  
8 question, but I think you answered it. Is  
9 there a cost out of pocket for you to be  
10 covered under your husband's plan through  
11 Parma?

12 A. No.

13 Q. No?

14 A. No. It's the same cost whether I'm  
15 on or off.

16 Q. Where was your last employment  
17 prior to Holy Family?

18 A. University Hospitals at Parma.

19 Q. You were employed there as a  
20 rehabilitation therapist?

21 A. Correct.

22 Q. You worked for UH Parma on a  
23 geriatric psych floor; is that correct?

24 A. Yes.

25 Q. You were part of a team of

1 professionals treating individuals that were  
2 experiencing some type of acute psychiatric  
3 condition; is that right?

4 A. Yes.

5 Q. At any given time, there could be  
6 14 patients in the department; is that right?

7 A. True.

8 Q. The staff in the department, other  
9 than recreational therapists, there were what  
10 other staff?

11 A. Generally, three nurses, the head  
12 manager, the assistant manager, a social  
13 worker, and the physician when he was there.

14 Q. From 2016 forward who were the  
15 nurses that were working there?

16 A. There were several. Marlene Kiel,  
17 I believe, Daniela Magda, Corey Kramer, I  
18 believe. I know there was somebody else.  
19 Let's see who else. Jen English. I know I had  
20 a list of them.

21 Q. So Marlene, Daniela, Corey, Jen,  
22 and you think maybe one or two others?

23 A. Yeah, at least. Their names are  
24 just escaping me at this time.

25 Q. In 2015-16 was there always three



1 nurses on duty?

2 A. I believe so. Candace was another  
3 nurse.

4 Q. You said there was a head manager?

5 A. Correct.

6 Q. Who was the head manager in 2016?

7 A. Kathy Holley.

8 Q. Who was the assistant manager?

9 A. Chrissy Rivera.

10 Q. Who was the social worker?

11 A. She was a newer social worker, so I  
12 can't think of her name.

13 Q. There was a physician who oversaw  
14 the patient care there; is that right?

15 A. Yes.

16 Q. Who was the physician?

17 A. Dr. John Sanitato.

18 Q. You would agree that one of the  
19 objectives and requirements of all of the staff  
20 collectively of the geriatric psych ward is to  
21 ensure that patients receive appropriate  
22 treatment and therapy to help address their  
23 acute psychiatric condition that they are  
24 experiencing, correct?

25 A. Yes.

1           Q.     You would agree that UH as the  
2     operator of the facility was obligated to  
3     ensure that that therapy and treatment was  
4     received in a safe environment, correct?

5           A.     Yes.

6           Q.     Did UH have policies or procedures  
7     in place to ensure patient and staff safety?

8           A.     Yes.

9           Q.     Can you tell me a little bit about  
10    those?

11          A.     There would be a whole binder full,  
12    but it's basically keeping the patients safe at  
13    all times. If they are at a risk for falls,  
14    being aware of that, and making sure they don't  
15    have any harmful items in their possession.

16          Q.     If a patient in the example you  
17    gave is at a risk for a fall, as an example,  
18    how would that information be shared or  
19    communicated among the staff?

20          A.     The nurses would usually make it  
21    aware. In many cases it was kind of an  
22    automatic precaution.

23          Q.     What precaution would that be?

24          A.     That the doctor's notes when they  
25    write precautions would usually be for falls.

1 It could be for elopement.

2 Q. So if that precaution or note is in  
3 a patient's record, how, if at all, would you  
4 change the way, for example, you provided  
5 therapy to those patients?

6 A. I would sit closer to them.

7 Q. Anything else other than sitting  
8 closer to them?

9 A. If they needed to be seated at a  
10 table for additional safety if we were in a  
11 circle, that could be an option as well.

12 Q. When did you start your employment  
13 at Parma?

14 A. In December of 1996.

15 Q. Were you always employed as a  
16 rehabilitation therapist?

17 A. Correct.

18 Q. From December of 1996 until  
19 sometime in 2014, was Parma a community  
20 hospital of its own?

21 A. Yes.

22 Q. Are you aware that in 2014  
23 University Hospitals acquired Parma?

24 A. Yes.

25 Q. So prior to UH's acquisition of

1 Parma, can you tell me how patients would come  
2 to be seen on the geriatric psych unit?

3 A. Many came from the physicians  
4 working on this unit, from their private  
5 practice, nursing homes, the emergency room,  
6 possibly outside referrals.

7 Q. Were there different physicians  
8 other than Dr. John Sanitato?

9 A. Correct.

10 Q. Who were the physicians that were  
11 overseeing the unit prior to UH's acquisition?

12 A. Over the years or --

13 Q. Sure. Why don't we start with  
14 right in 2014 moving back to whenever there was  
15 a change.

16 A. Dr. David Fox, Daniel Polster, and  
17 Robert Smitley.

18 Q. Do you know how to spell Daniel's  
19 last name?

20 A. Polster?

21 Q. Is it just P-O-L-S-T-E-R?

22 A. I don't know if there is an E after  
23 the L or not.

24 Q. How about Dr. Smitley?

25 A. Smitley, probably S-M-I-T-L-E-Y.

1           Q.       So Drs. Fox, Polster, and Smitley,  
2       they were all overseeing the unit at the same  
3       time?

4           A.       It was Dr. Fox initially, and then  
5       Dr. Smitley joined his practice, and then  
6       Dr. Smitley -- I think he still practiced when  
7       Dr. Polster came on board, but eventually  
8       Dr. Smitley left.

9           Q.       Were Drs. Fox, Smitley, and then  
10      eventually Polster all part of the same private  
11      practice outside of Parma?

12          A.       I believe so. Oh, there was  
13      another doctor in there, too, at one time, John  
14      Maholik.

15          Q.       You said, and again, this is prior  
16      to the UH acquisition, the patients would come  
17      from the doctors' private practice, correct?

18          A.       Correct.

19          Q.       And then you said nursing homes?

20          A.       Correct.

21          Q.       The nursing home patients would be  
22      referred directly to Parma, or would the  
23      referrals come in through the doctors, if you  
24      know?

25          A.       I'm not sure on the exact process.

1 It could be both.

2 Q. Was there an emergency room at  
3 Parma?

4 A. Yes.

5 Q. When you said the emergency room,  
6 is that the emergency room that would then lead  
7 to the patients being seen?

8 A. Correct. If they met that  
9 criteria, yes.

10 Q. Prior to UH acquiring Parma in  
11 2014, what were the most common diagnoses of  
12 the patients that you would see or provide  
13 therapy to?

14 A. Depression, dementia with  
15 agitation, bipolar disorder, psychosis.

16 Q. Was there any one of those four  
17 that one or two or more were more common, or  
18 was that a pretty even spread of diagnoses  
19 among the patients?

20 A. Probably even spread. Maybe  
21 dementia with agitation was the higher.

22 Q. I know it's a geriatric population,  
23 but can you tell me in terms of age what the  
24 most common age of patients was that you were  
25 seeing prior to 2014?

1           A.       Well, the unit is for 55 and older,  
2       so it could be any number there, but probably  
3       70s, 80s.

4           Q.       Probably 70s and 80s was the most  
5       common age of patients?

6           A.       Yes.

7           Q.       So I know the doctors were  
8       different. Once UH made the acquisition of  
9       Parma in 2014, were there other staffing  
10      changes on the psych unit, the geriatric psych  
11      unit I should say?

12          A.       I believe the assistant supervisor  
13      was a new position.

14          Q.       So you hadn't worked with Chrissy  
15      Rivera before?

16          A.       Not when I was at Parma, no.

17          Q.       Was there a different person  
18      holding that position?

19          A.       No.

20          Q.       Was there a head manager at Parma?

21          A.       Yes.

22          Q.       That person was not Kathy Holley,  
23      correct?

24          A.       Correct.

25          Q.       Who was that?

1           A.       Allison Fisher. She got married,  
2       so I'm not sure what her married name became.

3           Q.       When did she stop working at the  
4       Parma geriatric psych unit?

5           A.       I believe it was sometime in the  
6       summer or fall of 2015 when she stopped.  
7       That's what you said, correct?

8           Q.       Right. Do you know why she stopped  
9       working there?

10          A.       She got her master's in nurse  
11       practitioner.

12          Q.       So she took a different job?

13          A.       Correct.

14          Q.       Who was the head manager after  
15       Allison?

16          A.       I believe that Chrissy Rivera was  
17       an interim.

18          Q.       How about after the interim, was  
19       Kathy Holley the next head manager?

20          A.       Correct. Yes.

21          Q.       Let me go back. Were the nurses  
22       the same both prior to UH's acquisition of  
23       Parma and after?

24          A.       Those have changed, too. I mean,  
25       it's just kind of a transition of changes.



1 When Dr. Smitley and Polster left, a couple of  
2 the other nurses followed them.

3 Q. Do you know where they went,  
4 Drs. Smitley and Polster?

5 A. Southwest.

6 Q. Their move to Southwest, did that  
7 coincide with UH's acquisition?

8 A. I'm not sure.

9 Q. Do you know Drs. Smitley and  
10 Polster, are they working in the same capacity  
11 at Southwest as they were at Parma in the sense  
12 that they have a private practice and oversee  
13 an acute geriatric psych unit?

14 A. Dr. Smitley didn't go over to  
15 Southwest. He had left Parma, and I'm not sure  
16 where he went, but it was Fox and Polster.

17 Q. Okay. So Drs. Fox and Polster, are  
18 they operating, if you know, essentially in the  
19 same manner with a private practice?

20 A. I believe so.

21 Q. And then kind of an acute geriatric  
22 psych unit at Southwest?

23 A. Yes.

24 Q. Upon UH's acquisition of Parma,  
25 were there any changes made to the way the

1       geriatric psych unit operated?

2               A.       Probably gradual changes,  
3       paperwork, documentation.

4               Q.       Changes in paperwork and  
5       documentation you said?

6               A.       Yes.

7               Q.       What kind of changes?

8               A.       Moving over to what UH had already  
9       in place for their other facilities, I'm  
10      guessing.

11              Q.       Are there other geriatric psych  
12      units at UH that you're aware of?

13              A.       Yes.

14              Q.       Where?

15              A.       Richmond for sure, I believe  
16      Geauga, and possibly Elyria.

17              Q.       Had you ever worked at any of those  
18      locations?

19              A.       I observed over at Richmond  
20      Hospital one day.

21              Q.       What was the purpose of that?

22              A.       We were supposed to be mirroring  
23      their facility, so they were encouraging staff  
24      to go over there and see how they operate, so  
25      it was on our own time.

1 Q. Did you say mirroring?

2 A. Mirroring, yes.

3 Q. So UH was, for lack of a better  
4 term, wanting all the geriatric psych units to  
5 operate in the same manner?

6 A. I believe so.

7 Q. Was there a change in patient  
8 population after UH acquired Parma?

9 A. Yes.

10 Q. Can you describe that for me,  
11 please?

12 A. Well, since UH is much larger, we  
13 would get referrals from all over Northeast  
14 Ohio.

15 Q. As opposed to?

16 A. As opposed to probably more local.

17 Q. More local meaning around Parma?

18 A. Correct, and the surrounding  
19 suburbs.

20 Q. Did that result in an overall  
21 younger patient population?

22 A. To some extent, yes.

23 Q. So I think you said geriatric age  
24 ranges 55 and up, correct?

25 A. Correct.

1           Q.     Prior to UH's acquisition, I think  
2     you told me the lowest common age range was 70s  
3     and 80s?

4           A.     Yes.

5           Q.     Were you seeing now after the UH  
6     acquisition more patients in their late 50s and  
7     60s?

8           A.     At times.

9           Q.     After the UH acquisition, was there  
10    a more diverse set of diagnoses that the  
11    patients were experiencing?

12          A.     Probably.

13          Q.     Was there an increase in patients  
14    who were diagnosed with schizophrenia, for  
15    example?

16          A.     Statistic-wise I couldn't say.

17          Q.     How about just in your general  
18    observation do you believe that to be true?

19          A.     A few more, yes.

20          Q.     After UH's acquisition, was there  
21    also an increase of patients with depression  
22    with a suicide component, either ideation or  
23    actual attempts?

24          A.     There may have been.

25          Q.     Is that something that you

1 observed?

2 A. It's hard to say, you know, how  
3 much more, but slightly it increased.

4 Q. So there was an increase, but you  
5 are not able to say with any specificity how  
6 much more common that would be?

7 A. Right. The unit kept statistics, I  
8 would think.

9 Q. One of the terms I've seen in some  
10 of the records is patient acuity. Can you tell  
11 me what that term means, if you know?

12 A. Well, acute is usually short term.

13 Q. If someone says there is after the  
14 UH acquisition patients with a higher acuity,  
15 would you know what that phrase is referring  
16 to?

17 A. Probably higher risk, I would  
18 guess.

19 Q. Higher risk of either self-harm or  
20 harm to others?

21 A. I think so.

22 Q. Would you agree that there was an  
23 increase in patients with a higher level of  
24 acuity after UH's acquisition?

25 A. To some degree, yes.

1           Q.     After UH's acquisition, was there  
2     an increase in patient events that would cause  
3     the need for intervention, physical  
4     intervention?

5           A.     There may have been.

6           Q.     Is that something that you  
7     personally observed?

8           A.     Possibly at times.

9           Q.     Did you observe the need, for  
10    example, I guess the increased need of either  
11    security involvement or other staff intervening  
12    physically with patients after UH's  
13    acquisition?

14          A.     Probably.

15          Q.     Were there any changes in policies  
16    or procedures after UH acquired Parma?

17          A.     I would think so.

18          Q.     Do you have a memory or  
19    recollection of what any of those were?

20          A.     I do not.

21          Q.     When Parma became part of the UH  
22    system, was there, for lack of a better term, a  
23    general onboarding training process that you  
24    went through?

25          A.     Yes.

1           Q.       That would have occurred sometime  
2       in 2014 or 2015; is that right?

3           A.       Probably.

4           Q.       Do you have any recollection of the  
5       topics covered or what was discussed during  
6       that onboarding and training?

7           A.       UH has an LMS which I believe is  
8       like the continuing education items to  
9       complete.

10          Q.       LMS stands for learning management  
11       system?

12          A.       I believe so.

13          Q.       That would require regular internal  
14       kind of coursework or training?

15          A.       Right. Right.

16          Q.       On whatever topics would be  
17       necessary for you, for example, for working on  
18       the geriatric psych unit?

19          A.       Correct, or in the hospital in  
20       general.

21          Q.       That was different than the system  
22       in place under Parma prior to UH?

23          A.       Right. Parma had their own system,  
24       and UH had theirs.

25          Q.       How did they differ?

1           A.       Well, some of the change came with  
2       the increase in technology, too, at one point.  
3       You know, a lot of items at Parma were maybe  
4       paperwork or set up where you walk through and  
5       complete items like a safety fair they would  
6       have, and you would go from table to table  
7       answering questions, and then eventually that  
8       stuff just moved on to on line to complete.

9           Q.       Other than doing it in person or at  
10      a safety fair, for example, versus on line, was  
11      there a change in kind of the substance or the  
12      volume of the training material?

13          A.       The volume definitely increased as  
14      well as the topics.

15          Q.       So more topics and more often under  
16      UH as opposed to Parma?

17          A.       Correct.   Yes.

18          Q.       That was something that everyone I  
19      guess in your world, everyone at the geriatric  
20      psych unit who was at Parma previously and then  
21      continued at UH, was required to go through?

22          A.       Yes.

23                  MR. BULEA:   We'll just take a  
24      break.

25                               (Brief recess.)



1           A.       There was another doctor that I  
2       could add for UH.

3           Q.       Okay.

4           A.       Dr. Fitzgerald.

5           Q.       That was you said after --

6           A.       Yes.    She was another UH  
7       psychiatrist.   She was there for a short time,  
8       and I couldn't tell you the dates.

9           Q.       After the acquisition?

10          A.       Correct.

11          Q.       But prior to Dr. Sanitato?

12          A.       No.    She did work with him.

13          Q.       To your knowledge did  
14       Dr. Fitzgerald and Dr. Sanitato maintain  
15       private practices?

16          A.       I believe so.

17          Q.       Could you tell me what your  
18       understanding of your job duties and  
19       obligations were as a rehabilitation therapist?

20          A.       To provide therapeutic groups to  
21       the patients, work as a member of the  
22       interdisciplinary team.

23          Q.       Anything else?

24          A.       Whatever else was required of the  
25       job, you know, completing continuing education

1 or whatever learning.

2 Q. As part of providing therapeutic  
3 groups for patients, was patient assessments  
4 part of your job responsibilities?

5 A. Yes.

6 Q. That would include an assessment  
7 upon the patient's initial arrival to the  
8 geriatric psych unit, correct?

9 A. I believe within 24 hours.

10 Q. What was the purpose of that  
11 assessment that you would complete?

12 A. To identify any specific issues to  
13 address.

14 Q. How would you go about completing  
15 those assessments?

16 A. Asking questions, observation in  
17 group, other information from staff in the team  
18 meetings, the chart.

19 Q. Your assessment was specifically  
20 geared toward the functional and rehabilitative  
21 needs of the patients; is that correct?

22 A. Generally their leisure interests.

23 Q. What does that mean, leisure  
24 interests?

25 A. What they like to do for fun,

1 social, emotional, physical, cognitive.

2 Q. Was the goal to gain an  
3 understanding of that so that you could gear  
4 your therapy towards improving, for example,  
5 their cognitive and emotional functioning?

6 A. Right, along with their diagnosis.

7 Q. So after the initial assessment,  
8 you would then plan and implement and evaluate  
9 the therapy for each patient; is that right?

10 A. Identify goals to work on with that  
11 patient, yes.

12 Q. Was each therapeutic session  
13 planned and implemented based on the different  
14 goals of whatever patient population you were  
15 serving at a given time?

16 A. Generally, yes.

17 Q. Then as part of your job you were  
18 required to evaluate how the patients responded  
19 to the therapy, correct?

20 A. Correct.

21 Q. You would then report on that  
22 evaluation and outcome to the rest of the  
23 treatment team to complete the patient's  
24 assessment?

25 A. Each patient was documented on

1 after each group. There were generally two  
2 group sessions a day, so there were two group  
3 notes that were written, and then adding any  
4 information in the treatment team that occurred  
5 on a daily basis in the morning.

6 Q. When you say two group notes per  
7 day, that would be individual to the patient,  
8 though, correct?

9 A. Correct.

10 Q. So how each individual patient  
11 performed or responded to the group therapy?

12 A. Right. Yes. Each patient got a  
13 note twice a day from the rehab therapist.

14 Q. What methods would you use to  
15 perform your evaluation of how an individual  
16 patient was performing or responding to the  
17 therapy you were providing?

18 A. There was a standard note, and  
19 often a check box for behaviors and their  
20 participation, and then an area for a brief  
21 summary, I believe.

22 Q. So you said there was a check box  
23 for behaviors?

24 A. Correct. Yeah. We had a list of  
25 various behaviors noted, and you would check

1       those off if any applied.

2               Q.       What were those?

3               A.       They could vary; calm, agitated,  
4       probably hallucinating, affect. I'm sure there  
5       is more.

6               Q.       What methods would you use to  
7       determine whether a patient was calm, agitated,  
8       hallucinating, or to judge their affect?

9               A.       Their observation and participation  
10       in group.

11              Q.       How did you observe and make an  
12       assessment of their participation in group?

13              A.       Through interaction, questioning,  
14       getting up, moving around the room at times,  
15       just, again, observing.

16              Q.       When you say through interaction,  
17       is that verbal communication with the patient?

18              A.       Yes.

19              Q.       Between you and the patient?

20              A.       Yes. It could be physical if we  
21       were exercising.

22              Q.       What type of physical interaction  
23       as an example?

24              A.       Like chair exercises, just moving  
25       arms, legs, sometimes assisting a patient if

1       they weren't able to do it themselves, a pat on  
2       the shoulder for doing a good job, or if they  
3       need to wake up, you know, a pat on the knee or  
4       the shoulder again, verbal cues, prompts.

5               Q.       You said if they need to wake up?

6               A.       Yeah. They could fall asleep.

7               Q.       Were these patients, I'm sure they  
8       were all different, but in a general sense were  
9       they being medicated while they were on the  
10      unit?

11              A.       If the doctor felt so, yes.

12              Q.       Was that pretty typical, that the  
13      patients you were doing group therapy with  
14      would be on some type of medication?

15              A.       Yes. Yes.

16              Q.       How would you identify, for  
17      example, I think you said agitated, how would  
18      you come to the conclusion that a patient was  
19      agitated.

20              A.       If they are very fidgety, restless,  
21      sometimes verbal, if they are calling out or  
22      starting to get a change in their tone of  
23      voice.

24              Q.       Did you ever have patients who were  
25      non-verbal?

1           A.       A few.

2           Q.       In what ways did you change your  
3       technique or your evaluation process to  
4       complete the assessments of those patients?

5           A.       More interactions with nursing. I  
6       guess it would depend on the patient, asking  
7       them questions, maybe if they nod their head  
8       yes or no, writing things down if they are  
9       able. Sometimes I would write questions out  
10      for them to read. Again, they could agree or  
11      disagree if able.

12          Q.       Part of your job included you said  
13      participating in interdisciplinary rounds on a  
14      daily basis; is that right?

15          A.       Yes.

16          Q.       What did that entail?

17          A.       Nursing, the physician, the  
18      manager, myself, and a social worker met every  
19      morning to go over the patients to review their  
20      treatment plans if they were needing an update.

21          Q.       So you would give daily updates of  
22      the patients' performance in your group  
23      therapy? Is that how you contributed to that  
24      discussion?

25          A.       Yes.

1           Q.     Were there any other ways that you  
2 would participate in that discussion?

3           A.     Not that I can think of.

4           Q.     Were there call lights on the unit?

5           A.     Yes.

6           Q.     Can you tell me what those are?

7           A.     If the patient is in their room and  
8 needs assistance, they have a button that they  
9 can press or that nursing can press if they  
10 need additional assistance, and there were also  
11 call lights in the group rooms and in the rest  
12 rooms.

13          Q.     Was it part of your  
14 responsibilities to respond to those?

15          A.     Yes.

16          Q.     Is that a duty that everyone on the  
17 unit has?

18          A.     Yes.

19          Q.     Is it also part of your job to  
20 ensure that patients are in a safe environment  
21 when they are, for example, in the group  
22 therapy sessions?

23          A.     Yes.

24          Q.     For your therapy sessions, what  
25 types of activities were included in those?



1           A.       Generally, morning group started  
2       with a community group where we would go over  
3       orientation, maybe some trivia relating to the  
4       day, asking -- we could do patient  
5       introductions if it's a whole new group or if  
6       we had a new person.

7                       Sometimes I'd ask them like a  
8       question of the day, and everybody could go  
9       around the circle. Generally, we're set up in  
10      a circle for that. Maybe goal setting, how  
11      they are feeling, and then we'd move into chair  
12      exercises and then maybe some other type of  
13      large motor skill activity, and then that  
14      generally would go 45 minutes to an hour.

15                    Then we would rearrange back to  
16      tables for the next activity. I'd give them a  
17      snack or a beverage, and then the second  
18      activity within -- because in the morning it  
19      was like a two-hour time span that we had them  
20      -- it could be a discussion maybe on depression  
21      or self-awareness, self-esteem, depression,  
22      just depending on whatever the need of the  
23      group was.

24           Q.       When you say chair exercises, can  
25      you tell me what that entails?

1           A.       Basically stretching while sitting  
2       in a chair.   Some techniques are yoga.   My  
3       training came through the Arthritis Foundation.

4           Q.       So stretching?   Yoga?

5           A.       Deep breathing.

6           Q.       Then you said large motor skill  
7       activities?

8           A.       Correct.

9           Q.       What were some of those?

10          A.       Those could be like throwing a ball  
11       into a basket, horseshoes, bowling, balloon  
12       volleyball.

13          Q.       I take it, for example, horseshoes,  
14       bowling, those would be set up in the group  
15       therapy, right?   You weren't going outside of  
16       the unit with these patients?

17          A.       Correct.

18          Q.       In fact, it was a locked unit,  
19       right?

20          A.       Yes.

21          Q.       So that would be the morning  
22       session, and then there was also an afternoon  
23       session?

24          A.       Correct.

25          Q.       What happened at the afternoon

1 session?

2 A. Again, that could be more leisure  
3 based or again for the diagnosis depending on  
4 the group, but it could be Wheel of Fortune was  
5 common, other cognitive activities, word games.

6 Q. Would you then complete a second  
7 round of documentation in the afternoon after  
8 that session for each patient?

9 A. Yes.

10 Q. When did you meet Kathy Holley?

11 A. Sometime in early January when she  
12 started.

13 Q. Of what year?

14 A. 2016.

15 Q. Was there a change in the way that  
16 the treatment and therapy and operation of the  
17 unit ran after Kathy became the head manager?

18 A. I think we were working on some  
19 minor changes.

20 Q. Can you describe those?

21 A. Probably the times in which groups  
22 started would be the biggest, and then, again,  
23 like working on changing the documentation for  
24 the groups.

25 Q. Did Kathy make it a point of

1 emphasis to increase the activity level for the  
2 younger geriatric patients or patients with  
3 higher acuity?

4 A. Well, the activities would gear  
5 towards whatever population we had.

6 Q. You worked part time, correct?

7 A. Correct.

8 Q. When you were on duty, were you the  
9 only recreational therapist on the unit?

10 A. Yes.

11 Q. Were you the one charged then with  
12 operating both the morning and afternoon  
13 groups?

14 A. Yes.

15 Q. Did you run those groups solo, on  
16 your own?

17 A. Yes.

18 Q. In February or March of 2016, Kathy  
19 Holley provided a performance review for you;  
20 is that correct?

21 A. Yes, in March.

22 Q. Can you tell me everything you  
23 recall about that discussion?

24 A. I believe there were no issues with  
25 the evaluation. She raised a concern that

1       there was, quote, nothing in my file, end  
2       quote, and went on to elaborate in regards to  
3       accommodations. I had explained to her that,  
4       you know, I have various accommodations, and a  
5       lot of those I've done on my own or with  
6       previous assistance with managers.

7               Q.       Was the conversation more specific  
8       than what you just relayed to me, or was that  
9       just in a general sense?

10              A.       I believe it was just general.

11              Q.       What accommodations, if any, were  
12       you receiving at the time, and, if so, did you  
13       discuss those with Kathy at that time?

14              A.       I had a closed circuit TV that I  
15       came with upon day one of my employment with  
16       Parma, and, you know, those may have changed  
17       over the years if they stopped functioning or I  
18       needed a new one. It was the computer  
19       technology, adaptive software, a larger  
20       monitor, and keyboard.

21              Q.       Did you discuss the closed circuit  
22       TV, the adaptive software, larger monitor, and  
23       keyboard with Kathy?

24              A.       I may have.

25              Q.       Did Kathy ever express any concern

1 or unwillingness to continue to provide those  
2 accommodations?

3 A. I think she felt the need that  
4 there needed to be some kind of record in my  
5 file with documentation of accommodations.

6 Q. Okay. Did she ever convey to you  
7 that those accommodations would be stopped or  
8 no longer provided or anything like that?

9 A. No. No.

10 Q. What led you to believe that she  
11 thought there needed to be documentation in  
12 regard to those accommodations?

13 A. Well, the fact that she stated  
14 there was nothing in my file.

15 Q. That's what she said, there is  
16 nothing in your file?

17 A. Correct.

18 Q. Did she ask that you provide  
19 information for the file?

20 A. I don't believe so.

21 Q. Between that conversation in March  
22 of 2016 and when you made some additional  
23 requests for accommodations later in October of  
24 2016, did you provide any documentation to  
25 Kathy or anyone at UH?

1           A.       Yes. I figured since she wanted  
2 something in my file, I would request a new  
3 closed circuit TV as the one I had was not  
4 always functioning to par. I did not get to  
5 choose that one when it was purchased for me,  
6 and the contrast was fairly poor, and  
7 oftentimes I would use it to write. So it's a  
8 closed circuit TV. You write, it comes up on  
9 the screen, and oftentimes as I'm writing, it  
10 would white out so I wouldn't necessarily see,  
11 or depending on what the material was, it may  
12 not show up in a distinct manner.

13           Q.       Because of that you made a request  
14 for a newer --

15           A.       A new one, yes.

16           Q.       When was that request made?

17           A.       I believe October of '16.

18           Q.       Between January of 2016 when you  
19 first met Kathy and that request in October of  
20 2016, was any documentation requested by Kathy  
21 or anyone at UH for the accommodations that you  
22 were currently receiving?

23           A.       The process may have started  
24 earlier from the point of the evaluation. I  
25 believe I wrote Kathy Holley a letter

1        requesting the closed circuit TV and that she  
2        had returned that to me stating I needed to go  
3        through disability management services.

4            Q.        Okay. So before that, and I guess  
5        maybe I'm not wording this correctly, before  
6        you made the request for the new TV, was there  
7        ever a time that Kathy or anyone from UH  
8        required you to submit documentation to keep  
9        receiving the accommodations that were  
10       currently in place?

11           A.        No.

12           Q.        So other than this conversation in  
13        March prior to your request for the new closed  
14        circuit TV, were there any other discussions  
15        that you had either with Kathy Holley or anyone  
16        else at UH about accommodations that either you  
17        had or that you needed?

18           A.        I don't believe so.

19           Q.        So in October of 2016, you  
20        submitted a request to Kathy for this newer  
21        closed circuit TV, and she returned it to you  
22        and said you need to go to disability  
23        management?

24           A.        Correct.

25           Q.        Is that what you did, did you go to



1       disability management?

2             A.       Yes.

3             Q.       Who at disability management did  
4       you speak to?

5             A.       I believe it was Kara.

6             Q.       Is her last name Ladaika?

7             A.       Yes.

8             Q.       What conversation did you and Kara  
9       have?

10            A.       I don't recall if it was so much of  
11       a conversation other than just getting the  
12       motions in place and the request, and she  
13       mailed out forms that had to be completed and  
14       then submitted.

15            Q.       What types of forms?

16            A.       I believe information from a  
17       physician for the need to validate the  
18       reasoning.

19            Q.       Did one of your physicians complete  
20       that form?

21            A.       Yes.

22            Q.       Who was that?

23            A.       I believe it was Dr. Traboulsi.

24            Q.       Was there also a form for you to  
25       complete?

1 A. Probably.

2 Q. Did you complete it?

3 A. Yes.

4 Q. Did Dr. Traboulsi provide his  
5 completed form directly to UH, or did he give  
6 it to; do you know?

7 A. Offhand I don't recall.

8 Q. Do you know when he completed his  
9 portion of the forms?

10 A. I know it was in a timely manner.

11 Q. I think you said in October it was  
12 submitted.

13 A. Right.

14 Q. Do you know whether the form  
15 Dr. Traboulsi completed would have been  
16 submitted around that time?

17 A. No, but that would be in whatever  
18 records I've turned in.

19 Q. Did you complete your portion of  
20 the form?

21 A. Yes.

22 Q. Around that same time?

23 A. Yes.

24 Q. When was the next time you had a  
25 discussion with anyone from UH about any type

1 of accommodation request?

2 A. I don't recall. It was --

3 Q. In your complaint in this case, you  
4 stated that in October of 2016 Kathy Holley had  
5 repeatedly asked you what job duties you  
6 couldn't perform; is that correct?

7 A. I don't think it was October. I  
8 thought it was January of '17.

9 Q. What did she ask you?

10 A. She had concerns over my ability to  
11 complete the essential job functions.

12 Q. Is that what she told you, that she  
13 had concerns over the ability you had to  
14 complete your essential job functions?

15 A. Yes.

16 Q. Did she ever ask you what job  
17 functions that you couldn't perform?

18 A. Yes.

19 Q. How did you respond?

20 A. I told her I could perform all of  
21 them.

22 Q. Was that multiple conversations, or  
23 did she ask that one time or many?

24 A. Maybe twice. Once she arranged a  
25 meeting with HR to go over that, and then I

1 think the second time may have been February on  
2 the day that she told me that I was going on  
3 mandatory medical leave.

4 Q. Another allegation in the complaint  
5 is that after you made this request for a new  
6 closed circuit TV in October of 2016 that Kathy  
7 Holley increased her observation and scrutiny  
8 of your work performance. Is that correct?

9 A. I agree.

10 Q. How did Kathy increase her  
11 observation and scrutiny of your work  
12 performance?

13 A. I believe she was present in the  
14 group room more often.

15 Q. Was that something that was  
16 atypical of her prior to that request?

17 A. Yes.

18 Q. So prior to October of 2016, it  
19 wasn't her regular practice to observe at least  
20 portions of the group therapy?

21 A. Correct.

22 Q. She was not in there at all?

23 A. She may have been here or there,  
24 but not as often.

25 Q. How often was she in there

1 following your request in 2016?

2 A. I can't say.

3 Q. So what forms the basis for your  
4 allegation that the scrutiny and observation  
5 was increased?

6 A. Just whenever she had come in, I  
7 guess.

8 Q. So her presence there; am I  
9 understanding that testimony correctly?

10 A. Well, if we're thinking of the one  
11 particular episode with the bingo incident.

12 Q. What is that you're referring to?

13 A. That's when she stated that I  
14 wasn't able to assist a patient with the  
15 activity and that nursing had to help.

16 Q. Let me just back up for a second.  
17 This would have happened sometime in late 2016?

18 A. No. I believe it was January of  
19 '17.

20 Q. Bingo, I take it, was part of the  
21 therapeutic activities that you were doing that  
22 day?

23 A. Yes.

24 Q. So was it true then that you  
25 weren't able to assist the patient with their

1 completion of the bingo activity?

2 A. I was taking a passive approach.

3 Q. What does that mean?

4 A. That patient in particular could  
5 often monopolize group, so I was just being  
6 more passive with him and just providing some  
7 reassurance with maybe a yes or good job.

8 Q. What specifically was that patient  
9 doing at the time?

10 A. Sitting at the table leaning in  
11 towards me a little bit, no significant or bad  
12 behaviors.

13 Q. So I take it then you disagreed  
14 with Kathy's conclusion that there was  
15 assistance needed and you didn't recognize it?

16 A. Correct.

17 Q. So was there, I guess for lack of a  
18 better term, and you can describe it however  
19 you want, but was this patient asking for  
20 assistance or signaling for assistance in some  
21 way?

22 A. Possibly.

23 Q. Do you know one way or the other?

24 A. No.

25 Q. Kathy was there that day?

1 A. Yes.

2 Q. It wasn't Kathy that stepped in,  
3 correct?

4 A. No.

5 Q. Who did?

6 A. I don't know if there were other  
7 nurses that may have, but they occasionally  
8 have helped out in the past, and then other  
9 patients help each other which is a therapeutic  
10 technique in itself.

11 Q. In this specific instance, did one  
12 of the nurses step in to help this patient?

13 A. They may have.

14 Q. Do you know?

15 A. I don't know for sure.

16 Q. Would that be upsetting to you if  
17 they did?

18 A. No.

19 Q. If you were using a passive  
20 technique, would you have redirected that nurse  
21 and told them, hey, I'm working on a  
22 therapeutic technique here, so please don't do  
23 that?

24 A. No.

25 Q. Why not?

1           A.       It wasn't necessary.

2           Q.       So did you and Kathy discuss this  
3 situation?

4           A.       Not until her initiating the  
5 meeting with HR.

6           Q.       What was the discussion at that  
7 time?

8           A.       Again, based on being able to  
9 perform my essential job functions and her  
10 making the comment about that particular group  
11 with the patient.

12          Q.       What did you say?

13          A.       I think I just was caught off  
14 guard.

15          Q.       Did you ever explain to Kathy that  
16 you were using a passive approach on that  
17 patient?

18          A.       No.

19          Q.       Did you disagree with her  
20 conclusion that the patient was trying to  
21 signal for help, and you didn't see it or  
22 didn't recognize it?

23          A.       I don't know that I agreed or  
24 disagreed.

25          Q.       Is that something that could



1       happen, that patients would be signaling for  
2       help, and you wouldn't be able to recognize it?

3             A.       It would depend on the situation.

4             Q.       So sometimes that could happen, and  
5       other times it wouldn't; is that what you're  
6       saying?

7             A.       It would probably depend on how  
8       many people were in the group, what the group  
9       activity was, who was needing my attention at  
10      the time.

11            Q.       Up to how many people are in a  
12      group therapy session?

13            A.       Up to 14.

14            Q.       So a larger group, better chance  
15      that perhaps the need would go unrecognized; am  
16      I understanding your testimony correctly?

17            A.       That could be.

18            Q.       So after the conversation with  
19      Kathy in October in which she referred you to  
20      Kara in disability management, when was the  
21      next time you had a discussion with Kathy about  
22      any accommodation requests you had or concerns  
23      that Kathy voiced about your ability to  
24      complete your job functions?

25            A.       I think, as I recall, it was

1 January of '17.

2 Q. Before we get to that other, I  
3 asked you in which ways was Kathy's scrutiny or  
4 observation of your job performance increased,  
5 and you said she was in the group therapy room  
6 more often, correct?

7 A. I believe so.

8 Q. Were there any other ways other  
9 than her being in the group therapy room more  
10 often that her scrutiny or observation of your  
11 job performance increased?

12 A. I couldn't say if she was asking  
13 other people what their thoughts of my group  
14 leadership was.

15 Q. Who was she asking?

16 A. I don't know. That's what I said.  
17 I don't know if she was asking other people to  
18 observe as well.

19 Q. So you don't know one way or  
20 another whether that was happening?

21 A. I know that Kathy was present more  
22 often it seemed after October.

23 Q. I get that. I'm just trying to  
24 understand the facts behind the allegation that  
25 her scrutiny and observation increased. So she

1 was more present in the group therapy room. I  
2 get that. Is there any other way that you were  
3 aware of or recognized her increasing scrutiny  
4 of your work after October of 2016?

5 A. Not that I could think of.

6 Q. You said the next conversation with  
7 Kathy about accommodations or performance  
8 concerns took place in January of 2017,  
9 correct?

10 A. I believe so.

11 Q. Tell me what happened in that  
12 conversation.

13 A. She approached me one afternoon and  
14 said we had a 3:00 meeting in HR, so I believe  
15 we went down together and met with Deb Sheldon,  
16 and that was also when again she brought up the  
17 ability to perform the essential job functions.

18 Q. So in January you met with Deb  
19 Sheldon who is an HR generalist, correct?

20 A. Correct.

21 Q. And Kathy Holley, your manager?

22 A. Yes.

23 Q. During that meeting they voiced  
24 concerns about you being able to complete your  
25 job duties?

1           A.       Correct.

2           Q.       What specifically did they say?

3           A.       Well, they -- Deb Sheldon mentioned  
4       that the accommodations for a closed circuit TV  
5       were not an issue, but that, again, being able  
6       to perform the essential job functions which,  
7       you know, we went over the list, and Kathy said  
8       what her -- what she thought I could not do,  
9       and I disagreed with her because I feel I could  
10      do all those job functions.

11          Q.       So in this meeting you said that  
12      there was discussion about the closed circuit  
13      TV accommodation request, and Deb Sheldon told  
14      you that was not an issue?

15          A.       Correct.

16          Q.       Did you take that to mean that that  
17      was not part of their concerns in regard to you  
18      performing your job functions?

19          A.       Right. I felt by her response that  
20      them providing the closed circuit TV would not  
21      be a problem.

22          Q.       Certainly no one at UH ever stated  
23      that your use of a closed circuit TV was  
24      worrisome or caused them concern about your  
25      ability to do the job, right?

1 A. Correct.

2 Q. You said the other part of the  
3 discussion was, I am paraphrasing what you  
4 said, but more detail about specific job  
5 functions that Kathy didn't believe that you  
6 could perform?

7 A. Yes.

8 Q. This was in January; is that right?

9 A. I believe so.

10 Q. So this is separate and apart from  
11 the meeting where you were referred for a  
12 fitness for duty evaluation?

13 A. Right. That would have been the  
14 next meeting.

15 Q. Do you have a recollection of what  
16 specific job functions Kathy Holley raised  
17 concern about in that January meeting?

18 A. Not off the top of my head.

19 Q. Were they the same ones that were  
20 raised a couple weeks later in the fitness for  
21 duty meeting?

22 A. Probably.

23 Q. Did you have any discussions with  
24 anyone at UH between the January meeting you  
25 had with Deb Sheldon and Kathy Holley and then

1 the subsequent meeting in February where you  
2 were referred to a fitness for duty evaluation  
3 about either your accommodations or their  
4 concerns about your ability to perform the job  
5 functions?

6 A. Can you repeat that again, please?

7 Q. Sure. Maybe I'll lay a little bit  
8 more clear foundation. I understand there was  
9 two conversations, one in January and one in  
10 February, about Kathy's concerns in regard to  
11 your ability to do the job, right?

12 A. Uh-huh. Yes.

13 Q. Between the January meeting and the  
14 February meeting in which you were referred for  
15 a fitness for duty examination, did you discuss  
16 those concerns or any accommodation request you  
17 had with anyone else at UH?

18 A. I don't think so.

19 Q. So the next time you had discussion  
20 about it was in February, specifically  
21 February 14th, 2017; is that right?

22 A. I believe so.

23 Q. Who was at that meeting?

24 A. Again, the same, Deb Sheldon and  
25 Kathy Holley.

1           Q.       What transpired during that  
2       meeting?

3           A.       I believe they said that again they  
4       had concerns that I was not able to perform the  
5       essential job functions, that they had safety  
6       concerns for myself as well as the patients and  
7       staff, and that they were placing me on a  
8       mandatory medical leave, and they had arranged  
9       an appointment for the next day to go down to  
10      the main campus and meet with the EAP staff.

11          Q.       Between those two meetings, was  
12      there a non-violent crisis intervention  
13      training that took place?

14          A.       Whether it was in between I'm not  
15      sure.

16          Q.       Sometime in early February?

17          A.       Yes.

18          Q.       What is non-violent crisis  
19      intervention training?

20          A.       It's where the staff learn  
21      techniques to deal with patients' behaviors,  
22      aggressive behaviors.

23          Q.       What types of aggressive behaviors?

24          A.       Hitting, kicking.

25          Q.       Violent outbursts?

1           A.       Yes.

2           Q.       Is patient self-harm included in  
3       that as well?

4           A.       Offhand I can't say.

5           Q.       In February of 2017, was that the  
6       first time you went through the non-violent  
7       crisis intervention training since UH had  
8       acquired Parma?

9           A.       I don't think so. I think it was  
10       the second.

11          Q.       When was the first?

12          A.       It probably would have been two  
13       years prior.

14          Q.       So sometime in early 2015?

15          A.       I think so.

16          Q.       You had been through non-violent  
17       crisis intervention training prior to UH's  
18       acquisition of Parma, right?

19          A.       Yes.

20          Q.       Was the training in 2015 the same  
21       or very similar to the training, the  
22       non-violent crisis intervention training, that  
23       was done prior to UH's acquisition of Parma?

24          A.       And then there were some things  
25       that were similar, but it had changed over the



1       20 years that I was there. I would say the one  
2       in '15 was fairly similar to the one in '17.  
3       Maybe the way in which the techniques were  
4       performed may have changed a little bit.

5               Q.       Was there a written component to  
6       the 2015 training?

7               A.       I don't believe so. I believe that  
8       was in the past.

9               Q.       In 2015 had you received written  
10       materials about the training ahead of time?

11              A.       I don't believe so.

12              Q.       In 2015 did you work with a partner  
13       to complete the physical portion to the  
14       training?

15              A.       Like everybody else, yes.

16              Q.       That was going to be my next  
17       question. That would be true for everyone in  
18       the training?

19              A.       Yes.

20              Q.       In 2015 there was no written test  
21       following the training, correct?

22              A.       No.

23              Q.       I'm sorry?

24              A.       No.

25              Q.       So, no, there was not?

1           A.       There was no test.

2           Q.       Prior to UH's acquisition that was  
3 part of the training if I understand the  
4 documents that I've received in this case; is  
5 that right?

6           A.       I know initially when I started  
7 there was a written. I don't remember when  
8 that stopped.

9           Q.       So in 2017, the crisis intervention  
10 training, how large was the group that you  
11 participated in for that training?

12          A.       Maybe 12 to 14.

13          Q.       Was it on the unit?

14          A.       No. It was a separate facility.

15          Q.       Where was it?

16          A.       It was at the State Road  
17 educational building.

18          Q.       Prior to that training, did you  
19 have any communications with anyone at UH about  
20 either concerns you had about completing the  
21 training or any accommodations you needed or  
22 were going to request for the training?

23          A.       No. I've never had an issue in the  
24 past.

25          Q.       Did you have an issue in 2017?

1           A.       Nope.

2           Q.       I guess just describe it for me.  
3       You show up at the State Road facility. What  
4       happens to complete the training?

5           A.       The presenter talks about different  
6       things. Then you go into practicing the  
7       routines. He'll demonstrate often with  
8       somebody else, and then you and your partner  
9       demonstrate both as the perpetrator and as the  
10      victim. I guess you can put it that way.

11          Q.       So you take turns. For lack of  
12      better terminology, I'll use a different term  
13      than perpetrator. You take turns as the  
14      patient with the violent outburst, so to speak?

15          A.       Yes.

16          Q.       The other end of that would be?

17          A.       Right. You're the staff versus the  
18      patient.

19          Q.       What types of I guess physical  
20      techniques were provided for training that day  
21      in 2017?

22          A.       Well, there is the hair grab, the  
23      choking, punching, grabbing, kicking.

24          Q.       So there would be techniques on how  
25      to deescalate or stop that type of behavior?

1 A. Yes.

2 Q. Who was your partner that you  
3 worked with in 2017?

4 A. Joy Rivera.

5 Q. Would your central vision  
6 impairment inhibit or prevent you from seeing a  
7 potential patient experiencing a violent  
8 outburst, grabbing for either your hair or some  
9 other patient's hair?

10 A. It would depend.

11 Q. On what?

12 A. I guess on the situation and the  
13 distance.

14 Q. So if it was happening I guess  
15 further away than a couple of feet, would that  
16 make it more difficult for you to recognize and  
17 appreciate what was going on?

18 A. Again, it's hard to say. It would  
19 depend on what they were doing.

20 Q. How about if a patient approached  
21 you directly to try and choke you, for example,  
22 would the vision impairment prevent any  
23 difficulty in observing or appreciating that  
24 situation?

25 A. I don't think so.

1           Q.     Have you ever had a patient  
2     experience a violent outburst toward you during  
3     your employment?

4           A.     No.

5           Q.     The group therapy session, I guess  
6     in a typical session, how far away are you from  
7     the patients that you're providing therapy to?

8           A.     It can vary depending on what the  
9     group is. If there is a circle, depending on  
10    how many people are in the circle, it could be  
11    at least 10 feet, I would say.

12          Q.     So at a distance of 10 feet, would  
13    your vision impairment prevent you from seeing  
14    one patient who might be experiencing a violent  
15    outburst trying to reach out to grab the person  
16    next to them to choke them or hit them?

17          A.     Again, it would depend.

18          Q.     On what?

19          A.     Probably the point at which the  
20    behavior is occurring.

21          Q.     So, for example, if a patient was  
22    reaching over to the person seated next to  
23    them, given your vision impairment, would you  
24    be able to tell whether or distinguish between  
25    whether that patient is reaching over to pat

1 the patient next to them on the shoulder?

2 A. I would probably get up to  
3 intervene just to see, you know, what was going  
4 on, you know, redirect, you know, is there  
5 something you need, you know, or we need to  
6 keep our hands to ourselves.

7 Q. So nothing about your vision  
8 impairment would prevent you from seeing what a  
9 patient is doing 10 feet away from you?

10 A. Again, it's hard to say.

11 Q. So what methods or techniques would  
12 you use to determine whether, for example,  
13 someone is reaching over to give another  
14 patient help with their bingo as opposed to  
15 reaching over to grab them or hit them or pull  
16 their hair?

17 A. Just their general mood, their  
18 current participation, voice. I mean, there is  
19 many ways to determine, auditory.

20 Q. If hypothetically, I mean, the mood  
21 was fine and there was no, you know, auditory  
22 warning beforehand, are there any other  
23 techniques that you would utilize to recognize  
24 a violent outburst?

25 A. Probably just ongoing interaction

1 with everybody.

2 Q. You would agree there is certainly  
3 a point that a violent outburst could occur  
4 from one of the psych patients on the unit at  
5 any given time, right? I mean, there is at  
6 least a small chance that could happen?

7 A. Right.

8 Q. In the non-violent crisis  
9 intervention training, when Joy was performing,  
10 for example, the hair grabbing or the punches  
11 as a violent patient, were you able to complete  
12 all the techniques that you were being trained  
13 on?

14 A. Yes, uh-huh.

15 Q. To your knowledge was Joy Rivera  
16 providing any auditory or physical prompts in a  
17 way different than any of the other  
18 participants?

19 A. I don't believe so.

20 Q. Was Joy Rivera someone you had  
21 completed that training with as a partner in  
22 the past?

23 A. I don't believe so.

24 Q. At the conclusion of the training  
25 or at any time during it, did either Joy or

1 anyone else in the room including the trainer  
2 express any concern to you about the way that  
3 you were completing the training?

4 A. Not at all. I was very surprised  
5 when that was brought up as an issue.

6 Q. Did you yourself ever have concern  
7 about being able to react in a crisis situation  
8 that could potentially involve a violent  
9 patient outburst?

10 A. No.

11 Q. So I want to get back to the  
12 February meeting you had, and I think you said  
13 it was with Deb and Kathy Holley again; is that  
14 right?

15 A. Yes.

16 Q. In that meeting you said there was  
17 a number of concerns that were raised, and you  
18 had disagreed with all of them; is that right?

19 A. Correct.

20 Q. Was one of their concerns your  
21 signing of treatment plan documents outside of  
22 your office or when you otherwise wouldn't have  
23 access to a closed circuit TV?

24 A. I believe that was one of their  
25 concerns, yes.



1           Q.     Is that something that you ever  
2     did?

3           A.     There were different methods and  
4     procedures over the years in which I've signed  
5     the documents. Sometimes I did have them in my  
6     office. Other times, you know, we just passed  
7     them around the room and signed them then as a  
8     team.

9           Q.     Had you ever completed or signed  
10    off on a treatment plan document without a full  
11    understanding of what was in that document?

12          A.     No.

13          Q.     If you weren't in your office or  
14    near your closed circuit television, how would  
15    you determine what was in the documentation  
16    that you were signing?

17          A.     Through the discussion of the team  
18    and from previous completion of my portion of  
19    the treatment plan.

20          Q.     Did Kathy and Deb convey concerns  
21    about your ability to complete assessments on  
22    patients and how they were progressing through  
23    therapy?

24          A.     I believe that was one of their  
25    concerns.

1           Q.     When they conveyed that concern,  
2     how did you react? What did you say?

3           A.     Again, I was surprised. It's never  
4     been brought to my attention that there were  
5     any issues about my assessments.

6           Q.     Did they express their concern that  
7     with a younger patient population and higher  
8     levels of acuity, the inability to see facial  
9     expressions and determine kind of mood through  
10    expression was something that they had concerns  
11    about?

12          A.     That was their concern, yes.

13          Q.     That's not something that you were  
14    concerned about?

15          A.     No.

16          Q.     How would you complete assessments,  
17    both initially and as therapy continued, to  
18    determine the person's emotional response to  
19    the therapy?

20          A.     Generally, the initial assessment  
21    was completed either bedside or at a table, and  
22    then other information may have been gathered  
23    through participation in group. Again,  
24    information from the treatment team, the chart.

25          Q.     In your group therapy sessions,

1 would you be able to tell whether a patient is,  
2 for example, smiling or looking upset if they  
3 weren't speaking?

4 A. Yes.

5 Q. How?

6 A. Again, it just depends on what the  
7 activity was and their level of participation,  
8 and if I wasn't sure, then I would ask the  
9 nurse that was present in the room if she  
10 agreed with my observation.

11 Q. What if there was not a nurse  
12 present?

13 A. Then I just based it on what I  
14 observed and how they participated.

15 Q. There wasn't always a nurse  
16 present, correct?

17 A. Intermittently there was not.

18 Q. So if there was no nurse present  
19 and the patient wasn't responding verbally,  
20 would you be able to tell, for example, whether  
21 they were experiencing an active hallucination?

22 A. I believe so.

23 Q. How would you do that?

24 A. Again, through how they are  
25 participating, reacting.

1           Q.       So when you say how they are  
2       reacting, how would you assess how they are  
3       reacting?

4           A.       If they are restless, fidgety,  
5       calm, in a daze, asleep.

6           Q.       How do you differentiate, for  
7       example, whether someone is in a daze or asleep  
8       or experiencing some type of hallucination?

9           A.       Probably through my verbal cues to  
10      them, and, again, maybe a pat on the shoulder  
11      or the knee.

12          Q.       So if you give a verbal cue to a  
13      patient and they don't respond to it, are you  
14      able to assess that patient's reaction or  
15      emotions at that time?

16          A.       Yes.

17          Q.       You would do that through what  
18      technique?

19          A.       Just noting that they were a  
20      passive participant and not actively engaging.

21          Q.       So how do you determine what the  
22      cause of their non-participation is in that  
23      situation?

24          A.       Observation, lack of interaction  
25      physically if they are non-verbal.

1           Q.     Right. So if they are non-verbal  
2     or they are choosing not to respond to your  
3     verbal cues, how is their emotional state  
4     determined? How would you make that  
5     determination?

6           A.     Again, through my observation of  
7     what they are doing at that time.

8           Q.     So their movements or lack thereof?

9           A.     Right.

10          Q.     If someone is not moving, you would  
11     agree that they could still be experiencing a  
12     number of different reactions to the therapy,  
13     right?

14          A.     Possibly, yes.

15          Q.     If they are not moving and not  
16     responding, what methods would you use to  
17     determine their response to the therapy or  
18     their current emotional state?

19          A.     Well, again, just trying to get  
20     them to engage, and, like I said, physical  
21     touch.

22          Q.     Was one of the concerns that was  
23     raised in that February meeting that you were  
24     unable to respond to patients' needs in group  
25     therapy?

1           A.       That's what Kathy Holley said.

2           Q.       Was there ever a time that you were  
3       unable to respond to a patient's needs?

4           A.       I don't believe so.

5           Q.       I think you said earlier other  
6       patients assisting each other is sometimes part  
7       of the therapeutic process?

8           A.       Yes.

9           Q.       Is that something that is always  
10       encouraged or something that you determined  
11       based on each group of patients and how they  
12       are individually performing or their diagnosis  
13       or whatever their individual characteristics  
14       are?

15          A.       Right. I mean, it's the dynamic of  
16       the group, you know, and some people are  
17       wanting to be more helpful and assist, and  
18       sometimes those people need redirection as  
19       well.

20          Q.       Are there times where you make a  
21       choice that patients should not be interacting  
22       with one another during the therapy?

23          A.       Correct. Yeah. Depending on the  
24       activity, right.

25          Q.       Has there ever been a time where

1       you were unable to identify unwanted patient  
2       interactions?

3               A.       No.

4               Q.       If patients are, for example,  
5       reaching over and taking items from one  
6       another, is that something that you'd be able  
7       to recognize?

8               A.       Possibly.

9               Q.       Is it possible that you would not  
10       recognize it?

11              A.       Again, it could depend on the whole  
12       situation, what's going on.

13              Q.       Certainly, it's possible, right?  
14       There is the possibility that someone could be,  
15       for example, taking items from another person,  
16       and you wouldn't see it, right?

17              A.       Correct.

18              Q.       Was one of the concerns that Kathy  
19       and Deb raised with you that other staff was  
20       worried or would not be willing to leave you  
21       alone in group therapy because of their  
22       concerns for your or the patient's safety?

23              A.       It was brought up, yes.

24              Q.       Was that something that you ever  
25       discussed with any other staff members?

1           A.       Nope.

2           Q.       No one other than Kathy and Deb in  
3       this meeting ever expressed concern for you or  
4       about your safety or the patients' safety in  
5       the group therapy room?

6           A.       Right. No, I just thought we  
7       worked well as a team.

8           Q.       Did you believe that concern was  
9       unfounded as well?

10          A.       Yes.

11          Q.       Were there times that you would be  
12       in the group therapy room by yourself?

13          A.       Yes.

14          Q.       And you would be leading the  
15       therapy and assessing the patients and  
16       evaluating them on how they were doing?

17          A.       Right.

18          Q.       So another concern raised I think  
19       was a physical walking into other staff members  
20       in hallways; is that right?

21          A.       Correct.

22          Q.       Is that something that had ever  
23       happened?

24          A.       A few times.

25          Q.       Was that of concern to you?



1 A. No.

2 Q. Did you ever have concern about  
3 running into either a patient or someone else  
4 in the group therapy room that could put you in  
5 an unsafe situation?

6 A. No.

7 Q. I guess tell me. You said it  
8 happened a couple of times. Describe for me  
9 the incidents which you can recall which were  
10 you walking into other people or other staff in  
11 the hallway.

12 A. I think there was one instance in  
13 the group room. I mean, it's hard to recall.

14 Q. When it happened did the other  
15 staff apologize or converse with you about it?

16 A. They both said, oops, sorry.

17 Q. So were there any other concerns  
18 that were raised by Deb or Kathy at that  
19 February 14th meeting?

20 A. Not that I can think of.

21 Q. So they raised these concerns with  
22 you. I take it during this February 14th  
23 meeting you voiced your disagreement with their  
24 concerns?

25 A. I believe I did.

1 Q. What did you tell them?

2 A. Well, that -- I mean, I just  
3 followed their -- what they were telling me to  
4 do.

5 Q. Did you then go to EAP, employee  
6 assistance, the following day?

7 A. Yes.

8 Q. Was it your understanding the  
9 reason you were sent there was because there  
10 was a concern about patient and personnel  
11 safety and your ability to perform the  
12 essential duties of your job?

13 A. That's what they said.

14 Q. Were there any other reasons that  
15 they provided you other than that on why you  
16 were being referred to the fitness for duty  
17 evaluation?

18 A. I don't think so.

19 Q. Is there anything else that you can  
20 recall about that February conversation with  
21 Deb and Kathy that we haven't already talked  
22 about?

23 A. No.

24 Q. Did you acknowledge in that meeting  
25 that their concerns about patient safety were

1 valid?

2 A. I may have agreed that patient  
3 safety is important.

4 Q. Did you tell Deb and Kathy that you  
5 understood why they were concerned?

6 A. Sure. Yes.

7 Q. Why would you make that statement?

8 A. Well, I mean, I can see how a  
9 person not being in my shoes can have concerns.

10 Q. What do you mean by that?

11 A. Well, if they are aware that I have  
12 visual limitations, I can see how their  
13 concerns are that I wouldn't be able to do the  
14 job, but they don't realize the extent to what  
15 I can and cannot see.

16 MR. BULEA: Let's take a brief  
17 break.

18 MS. WHITE: Would this be a good  
19 point to take a lunch break? It's 12:30.

20 MR. BULEA: Yes. Sure.

21 (Luncheon recess taken.)

22 - - - - -

23

24

25

AFTERNOON SESSION

CONTINUED EXAMINATION OF DEBORAH A. MOSS

BY MR. BULEA:

Q. Before the lunch break, we had just talked about the meeting you had with Deb Sheldon and Kathy Holley that resulted in your referral to the EAP department for a fit for duty process.

So is it your understanding that as a result of that meeting and the concerns that Kathy and Deb expressed in that meeting that you received what's called a mandatory referral to a fit for duty process?

A. Right. Yes.

Q. Then you went the following day, February 15th, to the EAP department to start that process?

A. Correct.

Q. Who did you meet there?

A. Georgene Kohlbacher.

Q. How long did that meeting last?

A. Well, I met with her initially, and we just kind of socialized before Karen Farley, the nurse, was ready to meet, but the overall meeting probably close to two hours I would

1 think.

2 Q. As part of that meeting, were you  
3 required to complete some intake forms and  
4 questionnaires?

5 A. Yes.

6 Q. Did you have any difficulty  
7 completing those?

8 A. No. They read them and wrote their  
9 answers in.

10 Q. What did Georgene and Karen Farley  
11 explain to you about the process?

12 A. Goodness. Well, Georgene explained  
13 her role as, you know, gathering information  
14 and kind of, I believe, as an employee  
15 advocate, I could be wrong, like the liaison,  
16 and, you know, that she would be the contact  
17 person for information if I had any questions,  
18 and then Karen Farley was the RN that gathered  
19 her medical piece.

20 Q. Did they advise you what you would  
21 need to do in order to return to work or what  
22 needed to happen, I should say, before you  
23 could return to work?

24 A. Yes, the completion of paperwork by  
25 physicians, which they did not give me any.

1       Apparently, it was sent directly to those  
2       doctors.

3               Q.       What doctors?  Where were they sent  
4       at least to your knowledge?

5               A.       Initially, it was to be my general  
6       physician that I had just seen within I think  
7       the last couple weeks of that visit, and then  
8       my eye doctor, Dr. Traboulsi.

9               Q.       So was it explained to you that in  
10      order to have you return to work your doctors  
11      would have to complete forms or advise in  
12      writing to UH that they felt you could return  
13      to work and perform the essential functions of  
14      your job either with or without accommodations?

15              A.       Yes.

16              Q.       Your doctors, you said initially  
17      they asked for information from a primary care  
18      doctor?

19              A.       Right.

20              Q.       That would be Dr. Bures; is that  
21      right?

22              A.       Yes.

23              Q.       And Dr. Traboulsi?

24              A.       Correct.

25              Q.       Did you also undergo a drug and

1 alcohol screen?

2 A. Yes.

3 Q. Did you ask any questions about why  
4 that was necessary?

5 A. I believe so, or just like, really?

6 Q. What was the response that you got?

7 A. It was just part of the testing.

8 Q. What did that entail from your end?  
9 What did you have to do to complete that drug  
10 and alcohol screening?

11 A. A urine sample.

12 Q. Was that done that day?

13 A. Yes.

14 Q. In the EAP facility?

15 A. Yes.

16 Q. Did you have to complete some forms  
17 associated with that?

18 A. Specifically to the drug test?

19 Q. Yes.

20 A. There may have been questions.

21 Q. Did you have any difficulty  
22 completing those or further accommodations that  
23 you would have needed to complete those?

24 A. No. Again, they just read them  
25 off, which I'm assuming they would probably do

1 with anybody else.

2 Q. Good. Did EAP or Karen Farley or  
3 anyone else from UH provide you with any  
4 documents that day?

5 A. They may have. I'm guessing they  
6 probably did.

7 Q. Do you know what those documents  
8 were?

9 A. Part of it could be just the  
10 general policy of the process itself. I don't  
11 think there was anything that I needed to  
12 complete to fill out to return.

13 Q. Did you contact your doctors,  
14 Dr. Bures or Dr. Traboulsi, about the fit for  
15 duty process?

16 A. Right away.

17 Q. What did you tell them? I guess  
18 that's not a real fair question. Let's start  
19 with Dr. Bures. What did you tell Dr. Bures?

20 A. I scheduled that appointment and  
21 went in, and he's like, What are you here for?  
22 I'm like, Well, I was put on mandatory medical  
23 leave, and apparently there is some papers you  
24 need to fill out. He told me that he had done  
25 everything, and I think I got a bill for like



1       \$95, and that was it. So it was like very  
2       minimal.

3               Q.       Dr. Bures returned you to work  
4       without any restrictions?

5               A.       Yes.

6               Q.       How about Dr. Traboulsi, what was  
7       the discussion you had with him?

8               A.       It was a phone call, and he was not  
9       under my insurance, so that was an issue as to  
10      how that would be covered. Again, I don't  
11      recall when I had last -- let's see. I would  
12      have last have seen him right before I went on  
13      UH's insurance, so either like December of '14  
14      or December of '15. Prior to that I would have  
15      seen him within those years.

16                      So I think he may have already had  
17      the paperwork, I'm not sure, but he referred me  
18      to the Cleveland Sight Center and said they  
19      would be a better judge.

20              Q.       Okay. Did you go to the Cleveland  
21      Sight Center?

22              A.       Yes.

23              Q.       Who did you see there?

24              A.       Dr. Balciunas.

25              Q.       Was that the first time you had

1       seen Dr. Balciunas?

2               A.       No.

3               Q.       When were the previous times?

4               A.       Offhand I don't recall. Certainly  
5 not on an annual basis, so maybe three to five  
6 years if that.

7               Q.       So sometime between the 2012 to  
8 2014 time frame would have been the time  
9 previous to this 2017 visit?

10              A.       Possibly. They would have their  
11 records.

12              Q.       What would have been the purpose  
13 for the prior visit to Dr. Balciunas?

14              A.       Probably just to go over if there  
15 were any new devices to utilize with the job or  
16 at home.

17              Q.       Was Dr. Balciunas ever a treating  
18 physician of yours?

19              A.       No.

20              Q.       So you were just there for --

21              A.       It's their low vision clinic.

22              Q.       So for vocational assessments?

23              A.       More or less, yes.

24              Q.       When did see Dr. Balciunas in 2017  
25 as part of the fit for duty process?

1           A.       I believe it was April.

2           Q.       What happened at that meeting or  
3 visit, I should say?

4           A.       She did an eye exam, I believe, and  
5 then obviously discussed the job duties in  
6 detail, went over the essential job functions.  
7 She may have had some adaptive devices that we  
8 tried out to see if they could be helpful for  
9 different situations.

10          Q.       Did you report to Dr. Balciunas  
11 that you had difficulty seeing patient facial  
12 expressions?

13          A.       I may have.

14          Q.       Did you report that sometimes  
15 you're not aware if a patient is getting out of  
16 their seat to Dr. Balciunas?

17          A.       I may have.

18          Q.       Did you report that sometimes you  
19 had difficulty identifying whether individuals  
20 were leaving or entering the room?

21          A.       Possibly.

22          Q.       Were those all things that are true  
23 that you sometimes have difficulty with?

24          A.       At times. Again, it depends on the  
25 situation.

1 Q. Did Dr. Balciunas complete the  
2 return to work paperwork from UH that was part  
3 of the fit for duty process?

4 A. I believe so.

5 Q. Were you aware that Dr. Balciunas  
6 in those forms indicated that you were unable  
7 to perform some of the functions of your job  
8 due to your vision impairment?

9 A. I think there were a few notes.

10 Q. So is that a yes, you were aware of  
11 that, or is that news to you?

12 A. Yes, that there maybe would be  
13 limitations with some of the job functions.

14 MR. BULEA: We can go off for a  
15 second.

16 (Discussion off record.)

17 - - - - -

18 (Thereupon, Deposition Exhibit 29, a  
19 Document Bates Labeled UH-MOSS 1361  
20 through 1362, was marked for  
21 purposes of identification.)

22 - - - - -

23 Q. I'm putting in front of you,  
24 Debbie, what's been marked as Defendant's  
25 Exhibit 29, and we just had a discussion off

1 the record, but certainly I want to give your  
2 counsel a chance to weigh in. I'll represent  
3 to you that this is the UH return to work form  
4 that Dr. Balciunas completed after her visit  
5 with you and returned to UH, and I have a  
6 couple of questions about it.

7 Dr. Balciunas indicated, and I'll  
8 read this in the middle of the page. I'm going  
9 to read it out loud. The question is, "Is the  
10 employee unable to perform any of his/her job  
11 functions due to the condition?" Dr. Balciunas  
12 put a checkmark next to yes.

13 The form continues, "If so,  
14 identify the job functions the employee is  
15 unable to perform," after which Dr. Balciunas  
16 hand wrote, "Facial recognition and  
17 expressions, signing treatment plans when not  
18 near CCTV, seeing in poor contrast  
19 environments, may not always have visual  
20 awareness of everything going on in a room,  
21 uses other cues to gather information."

22 MR. BULEA: Do you want to confirm,  
23 Emily, that's read correctly?

24 MS. WHITE: There is just a lot of  
25 other information on the page, so I'd just like

1 to note at the bottom of the page, it's not  
2 clear which question this is attached to, it  
3 says, "With appropriate adaptations including  
4 access to Topaz CCTV, her specialized glasses,  
5 plus Zoom Text talking software, Ms. Moss may  
6 be able to continue working part time with  
7 support from other staff members when needed.  
8 All of the employment related variables and  
9 necessary factors cannot be determined/fully  
10 assessed. By my assessment visual acuity is  
11 severely reduced, but Ms. Moss has been working  
12 with this condition for many years in her  
13 current capacity."

14 Q. Okay. As I read and then your  
15 counsel finished, is that consistent with your  
16 recollection of the discussion you had with  
17 Dr. Balciunas as part of the fit for duty  
18 process?

19 A. Yes.

20 Q. To the best of your knowledge, is  
21 that the information that Dr. Balciunas  
22 forwarded on to UH as part of the fit for duty  
23 process?

24 A. I believe so.

25 Q. Would you disagree with any of the

1 statements that Dr. Balciunas made which we  
2 just read to you?

3 A. No.

4 Q. After your visit with  
5 Dr. Balciunas, did you have further discussion  
6 with anyone from the Cleveland Sight Center?

7 A. She referred me to the occupational  
8 therapist and thought that would be a good  
9 source for further assistance in the workplace.

10 Q. Okay. Was the reason for that, as  
11 indicated on this form that we just read, that  
12 Dr. Balciunas was of the opinion that she  
13 couldn't complete a full assessment of your  
14 ability to perform the job functions?

15 A. I would agree.

16 Q. If we just go to the second page of  
17 Exhibit 29, I'll give your counsel a chance to  
18 see whether or not this is read accurately.

19 In the middle of that second page  
20 of Exhibit 29, there is a question that says,  
21 "Will the condition intermittently prevent the  
22 employee from performing some or all of his/her  
23 essential job functions?" Then there is a  
24 space for checking yes or no, neither of which  
25 are checked.

1                   Instead Dr. Balciunas hand wrote,  
2           "As noted certain job functions are challenging  
3           due to loss of central vision such as facial  
4           recognition and expressions interpretation."

5                   MR. BULEA: I just want to make  
6           sure, Emily, that I read that correctly.

7                   MS. WHITE: Sure. Just to note  
8           that there is another line that says, "I am  
9           unable to complete this portion in the manner  
10          requested by Dr. Balciunas."

11                  MR. BULEA: Okay.

12                  Q.       Again, the question for you,  
13          Debbie, would be is that consistent with your  
14          recollection of the meeting and discussion you  
15          had with Dr. Balciunas as part of the fit for  
16          duty process?

17                  A.       Yes.

18                  Q.       Again, do you have any disagreement  
19          with that comment or statements by  
20          Dr. Balciunas?

21                  A.       No.

22                  Q.       I'm sorry?

23                  A.       No.

24                  Q.       Did you discuss with anyone from UH  
25          your visit with Dr. Balciunas?



1 A. Such as.

2 Q. Georgene Kohlbacher or Deb Sheldon  
3 or Karen Farley or anyone else from the EAP  
4 department.

5 A. Possibly through phone calls to say  
6 that I've made the appointments.

7 Q. Was it your expectation that  
8 Dr. Balciunas would be providing the comments  
9 and the form directly to UH?

10 A. Yes.

11 Q. You had provided authorization for  
12 Dr. Balciunas to do that?

13 A. Yes.

14 Q. After seeing Dr. Balciunas, you  
15 said you were referred to an occupational  
16 therapist at the Sight Center; is that right?

17 A. Yes.

18 Q. Is that Erin St. Denis?

19 A. Yes.

20 Q. Did you meet with Erin?

21 A. Yes.

22 Q. What was the purpose of that  
23 meeting?

24 A. To go over ways in which I would be  
25 able to perform my essential job functions,

1 different techniques to try out.

2 Q. Where did you meet with Erin?

3 A. At the Sight Center.

4 Q. How long was that meeting?

5 A. Probably about two hours.

6 Q. Were you able to answer all the  
7 questions Erin had about your job and the  
8 duties you were charged with performing?

9 A. Yes.

10 Q. Was there any information that Erin  
11 requested from you that you weren't able to  
12 provide?

13 A. No.

14 Q. Did you report to Erin that there  
15 had been changes in the population served at  
16 the geriatric psych center?

17 A. It may have come up in  
18 conversation.

19 Q. What did you tell her about the  
20 change in population?

21 A. Offhand I would guess that it was  
22 younger, more psychiatric diagnoses.

23 Q. What do you mean by more  
24 psychiatric diagnoses for somebody who is not  
25 in the field?

1           A.       Right.   Probably more psychosis  
2       which includes hallucinations.

3           Q.       Were there any other ways that you  
4       would have conveyed to Erin the change in  
5       population?

6           A.       I don't think so.

7           Q.       Is this the first time you saw Erin  
8       St. Denis?

9           A.       Yes.

10          Q.       In her report, which we certainly  
11       don't need to read the whole thing, but which  
12       I'm going to mark so it's attached to the  
13       transcript as Defendant's Exhibit 30.

14                   -   -   -   -   -

15                   (Thereupon, Deposition Exhibit 30, a  
16                   Document Bates Labeled Moss  
17                   Production 000262 through 000264,  
18                   was marked for purposes of  
19                   identification.)

20                   -   -   -   -   -

21          Q.       She noted that while you were  
22       previously assessed and accommodation  
23       recommendations were made, there are some  
24       continued concerns. Do you know what previous  
25       assessment and accommodation recommendations

1 Erin is referencing in that statement?

2 A. I would only presume Dr. Balciunas'  
3 report.

4 Q. Okay. You had mentioned earlier in  
5 your testimony that you and Erin discussed some  
6 techniques that could be used or implemented to  
7 assist you in performing your job functions.  
8 What techniques were those?

9 A. Well, a lot of the issues that she  
10 brought up were a surprise to me, but I would  
11 start with I guess an iPad for some  
12 documentation, whiteboards that were not in  
13 use, gridding off those for scheduling. We had  
14 used those back in the Parma days, and  
15 apparently they were looking to doing that in  
16 the future.

17 Q. Okay.

18 A. What else? A tool for being able  
19 to sign treatment plans.

20 Q. Did you discuss with Erin St. Denis  
21 and go through with her some exercises using  
22 the closed circuit television, the Topaz unit?

23 A. I think so.

24 Q. Well, not the Topaz, but the closed  
25 circuit television was something that you had

1       been using since the start of your employment,  
2       correct?

3               A.       Correct.

4               Q.       Did you discuss with Erin St. Denis  
5       the Zoom Text software in conjunction with a  
6       larger monitor and adaptive keyboard that was  
7       present at your workstation at UH?

8               A.       Yes.

9               Q.       Jumping back to the CCTV, the Topaz  
10       model that you were looking to upgrade to, did  
11       anyone at UH ever tell you that that was going  
12       to be an issue or problem to provide to you?

13              A.       No.

14              Q.       I understand the Zoom Tech software  
15       was having some compatibility issues with some  
16       of the UH systems; is that right?

17              A.       Yes.

18              Q.       Did anyone from UH ever indicate to  
19       you that that would be an issue or a problem to  
20       have fixed through the IT department or  
21       otherwise?

22              A.       No.

23              Q.       According to Erin St. Denis'  
24       report, you and her also discussed copiers at  
25       the workplace at UH having a flat touch screen

1 making them difficult for you to use; is that  
2 right?

3 A. Correct. They were just in the  
4 process of making everything uniform, so we got  
5 a new copier, and it had a flat screen.

6 Q. Did you have to use the copier as  
7 part of your job?

8 A. Yes.

9 Q. From the time that this copier was  
10 in place until you went out for the fit for  
11 duty, were you able to make copies by asking  
12 others for assistance or in some other ways?

13 A. Correct. Yes.

14 Q. Is that how you did it?

15 A. Yes. I'd have to ask somebody for  
16 help.

17 Q. Did anyone at UH ever convey to you  
18 that providing bump dots on the copier would be  
19 an issue or that they wouldn't be provided?

20 A. Again, I think it was just one of  
21 those things that like just came up in the  
22 conversation that it was a concern, so I don't  
23 know that it ever went beyond what can we do to  
24 fix it.

25 Q. Certainly, no one said they are not

1 willing to work with you or provide some kind  
2 of solution so you'd be able to access the  
3 copier?

4 A. There was no -- I would say no  
5 response.

6 Q. Who did you talk with at UH about  
7 the modifications you'd like made to the flat  
8 screen copier?

9 A. I probably mentioned it to Jeri  
10 Novicky, the secretary on the unit.

11 Q. What did she say?

12 A. Offhand I don't know. I just -- I  
13 remember at one point I needed something taken  
14 care of, and she said to basically do it  
15 myself, and I said, Well, I can't read the  
16 screen to do it.

17 Q. Did she respond to your statement?

18 A. I don't think so.

19 Q. Were you able to get what you  
20 needed done that day?

21 A. Yes.

22 Q. Completed?

23 A. Yes.

24 Q. Did you speak with anyone other  
25 than her about the copier at UH?

1           A.       Again, I would say no because it  
2       was just everything coming up at one time and  
3       within a short time frame.

4           Q.       Did you and Erin St. Denis discuss  
5       the fact that you had other coworkers reading  
6       emails for you at work?

7           A.       Yes.

8           Q.       Did anyone at UH ever indicate to  
9       you that that was a problem or something that  
10      wouldn't be permitted to continue?

11          A.       No.

12          Q.       Erin mentions in here that one of  
13      the things that could be beneficial is a  
14      typoscope; is that right?

15          A.       I believe, yes.

16          Q.       Can you tell me what that is?

17          A.       I don't know. I don't recall  
18      offhand.

19                   MS. WHITE: For the record, it says  
20      typoscope/signature guide.

21          A.       So a signature guide, I know what  
22      that is.

23          Q.       What is that?

24          A.       It's generally they can come  
25      probably in different forms, but basically it's



1 a credit card size with a cutout for where you  
2 could place your signature, and you would just  
3 line it up on the line where you need to sign.

4 Q. Prior to this meeting with Erin St.  
5 Denis, was that something you had ever  
6 discussed or asked for from anyone at UH?

7 A. No.

8 Q. Did anyone at UH ever indicate that  
9 that wouldn't be provided had you returned to  
10 work?

11 A. No.

12 Q. I think we talked about the  
13 whiteboard being something that was mentioned  
14 as possibly being used in the future?

15 A. Right, and I had used it in the  
16 past with no issues.

17 Q. I think Erin suggested the use of  
18 contrasting electrical tape to grid off the  
19 whiteboard as a technique?

20 A. That's how it already was, yes.

21 Q. Again, no one from UH ever  
22 discussed any problem or issues with that setup  
23 with you, correct?

24 A. Again, no, I wasn't aware that was  
25 their plans until the evaluation.

1           Q.     Did you and Erin St. Denis discuss  
2     the I guess several occasions in which you had  
3     bumped into staff on the unit?

4           A.     That's a question?

5           Q.     Yes. Did you and Erin St. Denis  
6     discuss that?

7           A.     Yes.

8           Q.     Did you report to Erin that that  
9     was a mild concern of yours?

10          A.     Yes.

11          Q.     Do you recall any suggestions or  
12     techniques that Erin would have discussed with  
13     you or recommended to address that concern of  
14     yours?

15          A.     Offhand I don't recall, but she  
16     probably did. She had quite a lengthy report  
17     with suggestions.

18          Q.     Was one of the suggestions verbal  
19     cues from staff?

20          A.     Yes.

21          Q.     That was also her suggestion in  
22     regard to entering patient rooms if there is  
23     something else going on in that room that you  
24     need to be aware of, correct?

25          A.     Right.

1           Q.     Did anyone at UH indicate that  
2     providing those types of verbal cues would be  
3     an issue or a problem?

4           A.     I would say that all these  
5     solutions were done while I was on leave, and I  
6     was never given the opportunity to return to  
7     work to implement them.

8           Q.     Is that something you were already  
9     taking advantage of, the verbal cues from  
10    staff?

11          A.     Oh, definitely.

12          Q.     No one ever said don't ask for  
13    those or don't provide them to Debbie or  
14    anything like that, right?

15          A.     No.

16          Q.     Did you and Erin discuss the crisis  
17    intervention training that was required by UH?

18          A.     Yes.

19          Q.     Can you tell me what that  
20    discussion consisted of?

21          A.     Again, it was either her or  
22    Dr. Balciunas that brought it up of being a  
23    concern of UH. Again, it was a total surprise  
24    to me because I thought I had no issues with  
25    performing the tasks and was very surprised

1       when they came back saying I was unable to  
2       participate which was totally false.

3               Q.       Did Kathy or Deb mention to you  
4       that their concern centered around your ability  
5       to respond to an actual crisis should it happen  
6       on the unit in real life as opposed to the  
7       training?

8               A.       Repeat that again, please.

9               Q.       Sure. Did Kathy or Deb ever  
10       express to you that their concern was your  
11       ability to respond to an actual crisis should  
12       it happen as opposed to completing the  
13       training?

14              A.       They had concerns that a potential  
15       situation could arise and that I would not be  
16       able to react.

17              Q.       Was there any discussion between  
18       you and Erin about how to address that  
19       situation or whether there was any recommended  
20       techniques to help you respond in that  
21       situation?

22              A.       I'm guessing there probably was.

23              Q.       I'm just asking if you can recall  
24       what that was.

25              A.       Yeah, off the top of my head, I

1 don't remember.

2 Q. She says here, Erin that is, having  
3 materials ahead of time for review and  
4 partnering with a staff member or trainer who  
5 is aware of the need for verbal and touch  
6 prompts to motor Ms. Moss through any physical  
7 components would be beneficial, and that would  
8 have to do with the training, correct?

9 A. Correct.

10 Q. I don't see anything in the report  
11 about an actual crisis, and I'm just wondering  
12 if you have any recollection of discussing what  
13 may or could be done in an actual crisis.

14 A. Well, utilizing those techniques  
15 that I've learned, and if there is a crisis,  
16 there is other team members there. You know,  
17 the nurses take lead and charge and give  
18 direction as to what they need done. There  
19 have been plenty of situations where we've had  
20 patients get agitated, and we have needed to  
21 what we call table them and get them into a  
22 reclining chair and up against the table where  
23 I've assisted.

24 Q. Erin St. Denis also noted that, "It  
25 was reported that Ms. Moss has difficulty

1 noticing when patients get up from their seats,  
2 need assistance, i.e., during bingo, or reading  
3 patients' facial expressions."

4 Is that what you reported to her,  
5 or is that someone else's report?

6 A. That sounds like the report from  
7 Kathy Holley.

8 Q. Would you disagree that you would  
9 sometimes have difficulty noticing when  
10 patients get up from their seats?

11 A. Again, it would depend on the  
12 situation, how far away they are.

13 Q. So how far away would they need to  
14 be for you to have difficulty seeing them get  
15 up out of their seats?

16 A. It's just a guesstimate; 10,  
17 15 feet.

18 Q. So inside of 10, 15 feet you'd be  
19 able to see it?

20 A. I would think so.

21 Q. You would think. I mean, judging  
22 by that answer, are you uncertain, or are you  
23 able to say whether or not with certainty you  
24 would be able to?

25 A. I mean, I would think I would be

1       able to. Again, it's the situation. I mean,  
2       like Kerin just got up. The environment makes  
3       a big difference.

4               Q.       Okay. In her report Erin noted  
5       that you use auditory compensation strategies  
6       to listen for tone of voice or responsiveness  
7       when you're initiating a question or  
8       interaction. Is that accurate?

9               A.       Yes.

10              Q.       Can you give me an example of how  
11       you would use auditory compensation strategies?

12              A.       Again, just, you know, listening  
13       for the tone of voice. I can generally tell  
14       when somebody is starting to escalate. Their  
15       speech can become more rapid. They can be more  
16       repetitive. They can be asking for help.

17              Q.       Are there ever times where auditory  
18       compensation strategies could not be used or  
19       that you wouldn't be able to use those in your  
20       daily activities?

21              A.       Not that I can think of.

22              Q.       What about patients on mood control  
23       medication, for example, who are sedated?

24              A.       Well, if they are that sedated,  
25       they are probably in bed.

1           Q.     How about in determining a  
2     patient's affect?

3           A.     Again, just, you know, being closer  
4     to them, watching how they are partaking in the  
5     activity.

6           Q.     How would you confirm that the  
7     patients who are speaking to you are accurately  
8     relaying what their experience is?

9           A.     Well, I can only assume if they are  
10    saying that's what they are feeling that that's  
11    what the case is, and it would probably be  
12    based on previous group participation, just  
13    historically their behavior and if it's totally  
14    out of the norm or typical.

15          Q.     Erin St. Denis also notes in her  
16    report that you would ask other staff/nurses  
17    for feedback regarding patient behavior or  
18    affect. Otherwise, Ms. Moss is unable to see  
19    faces or expressions. Is that correct?

20          A.     At times I would ask nursing to  
21    verify. I would offer what I felt was going on  
22    and see if they validated that, but there is  
23    not ever a case where I can't see anything at  
24    all, I mean.

25          Q.     The report from Erin St. Denis then



1 concludes with a set of ten recommendations.  
2 Are you aware of whether or not those were  
3 discussed with UH as part of the EAP process?

4 A. I would presume they were  
5 discussed, but, again, I was never given the  
6 opportunity to go back to work to utilize them.

7 Q. Well, you knew that Erin St. Denis'  
8 report was going to be provided to the EAP --

9 A. Right.

10 Q. -- counselor at UH, correct?

11 A. Right.

12 Q. Again, you had authorized release  
13 of all that information, right?

14 A. Correct.

15 Q. Do you know Allison Evans?

16 A. I do not.

17 Q. You never met her?

18 A. Never.

19 Q. Do you know what her job at UH is?

20 A. Only from Deb Sheldon's deposition,  
21 that she's the occupational therapy supervisor,  
22 I guess.

23 Q. During the EAP process, were you  
24 aware that Allison Evans was going to be  
25 completing a functional capacity assessment of

1 your work environment?

2 A. I was not aware.

3 Q. As we sit here today, you're aware  
4 that Allison Evans did submit some findings and  
5 conclusions to the EAP counselor, Georgene  
6 Kohlbacher, in regard to your fit for duty  
7 process, correct?

8 A. Yes.

9 MS. WHITE: Can we go off the  
10 record for just a second?

11 MR. BULEA: Sure.

12 (Discussion off record.)

13 - - - - -

14 (Thereupon, Deposition Exhibit 31,  
15 an Email Bates Labeled UH-MOSS 1392,  
16 was marked for purposes of  
17 identification.)

18 - - - - -

19 Q. I just want to state for the  
20 record, I guess I'll just ask, that you had the  
21 chance to listen to your counsel read you what  
22 has now been marked as Exhibit 31 which is an  
23 assessment that Allison Evans completed as part  
24 of a fit for duty process, correct?

25 A. Correct.

1           Q.     Would you agree with Allison's  
2     conclusion that the geriatric psych unit is a  
3     dynamic environment?

4           A.     It is, yes.

5           Q.     It's continuously changing day to  
6     day with new patients, right?

7           A.     It can.

8           Q.     Patients themselves also have  
9     differing behavior in and of themselves,  
10    correct?

11          A.     They can, yes.

12          Q.     That can be from day to day or even  
13    maybe within group sessions, right?

14          A.     Yes.

15          Q.     Would you agree that your job as a  
16    rehabilitation therapist requires excellent  
17    situational awareness as Allison concluded?

18          A.     Yes.

19          Q.     Do you agree that you have to  
20    determine the affect of multiple patients at  
21    once as part of a group therapy session?

22          A.     That you have to be able to be  
23    aware of each patient, yes.

24          Q.     And perceive and report on how each  
25    individual patient is responding and behaving

1 in the therapy, correct?

2 A. Yes.

3 Q. I think you and your counsel were  
4 discussing that the groups can be up to 14  
5 patients at a time, correct?

6 A. Correct.

7 Q. Do you agree with Allison that you  
8 have to be able to respond to patients  
9 experiencing internal stimuli?

10 A. Yes.

11 Q. Do you agree that you would have to  
12 assess and respond to patients even if they had  
13 communication or behavioral issues that could  
14 pose a safety risk or threat?

15 A. Yes.

16 Q. Do you agree with Allison's  
17 conclusion that it's necessary to track patient  
18 movements and interactions with one another?

19 A. Right. It's important to be aware  
20 of what they are doing.

21 Q. Her ultimate conclusion is that  
22 there is little that can be done to accommodate  
23 for the variability of a psychiatric patient  
24 population for someone with such significant  
25 vision deficits. Do you agree with that?

1           A.       Not necessarily.

2           Q.       Why not?

3           A.       Because I believe that there are  
4 reasonable accommodations.

5           Q.       Such as?

6           A.       Again, another staff person  
7 present, you know, still being able to pick up  
8 on different behaviors, different signs that  
9 the patients are showing.

10          Q.       Through means other than visually,  
11 you mean?

12          A.       Correct.

13          Q.       Did you as part of the fit for duty  
14 process ultimately end up meeting with  
15 Dr. Traboulsi?

16          A.       I do not believe so.

17          Q.       Are you aware that he submitted a  
18 report to UH as part of the EAP process?

19          A.       Yes.

20          Q.       Again, that would have been  
21 something that you authorized disclosure of to  
22 UH?

23          A.       Correct.

24                   - - - - -

25                   (Thereupon, Deposition Exhibit 32, a

1 Document Bates Labeled Moss  
2 Production 000265, was marked for  
3 purposes of identification.)

4 - - - - -

5 MS. WHITE: Do you want me to take  
6 a minute and read this one, too, this letter?

7 MR. BULEA: We can do that, too,  
8 certainly. It's not long at all.

9 (Discussion off record.)

10 Q. Ms. Moss, Debbie, did you have the  
11 opportunity just now to hear the report of  
12 Dr. Traboulsi as your counsel just read which  
13 is marked as Exhibit 32?

14 A. Yes.

15 Q. As you heard, one of the things  
16 that Dr. Traboulsi noted is that your ability  
17 to see details and small targets from a  
18 distance and even near is -- strike that. Let  
19 me start over.

20 Dr. Traboulsi noted that you've  
21 lost your central vision that provides you with  
22 the ability to see details and small targets  
23 from a distance and even near. Do you agree  
24 with his assessment?

25 A. That can be true, yes.

1           Q.       When you say it can be true, is  
2       that a distance kind of issue for you again?

3           A.       Right. Again, yes, situational.

4           Q.       Dr. Traboulsi also says that you're  
5       not able to provide or that he's not able to  
6       provide the impact of the poor central vision  
7       on your ability to perform your job tasks,  
8       correct?

9           A.       I believe.

10          Q.       He also reiterates here that from a  
11       distance you would not be able to recognize  
12       faces or expressions on faces, correct?

13          A.       In some cases.

14          Q.       And you agree with that?

15          A.       Yes.

16          Q.       He also indicates that his hope is  
17       that you would receive appropriate training.  
18       Did you hear that?

19          A.       Yes.

20          Q.       Do you know what training he's  
21       referring to?

22          A.       I again would be presuming. It  
23       would be up to the professional in that area  
24       providing that particular training, but ways  
25       again to make things accessible and easy to do.

1           Q.       You're aware that this report from  
2       Dr. Traboulsi was provided to UH in May,  
3       specifically May 23rd of 2017, as part of the  
4       EAP process?

5           A.       Yes.

6           Q.       After your meeting with Kathy  
7       Holley and Deb Sheldon in February, when was  
8       the next time you met with either Deb Sheldon  
9       or Kathy Holley to discuss the fit for duty  
10      process?

11          A.       I believe it was June 1st.

12          Q.       Between February 15th and June 1st  
13      of 2017, did you have discussions with anyone  
14      at UH?

15          A.       There were some phone calls.

16          Q.       Who did you have phone calls with?

17          A.       There were some with Deb Sheldon  
18      and Kathy Holley, some with Georgene, Kara, and  
19      possibly Karen Farley from EAP.

20          Q.       What was discussed on those phone  
21      calls?

22          A.       There were various things. I'm  
23      guessing a lot was just follow-up status,  
24      questions on some forms and what was going on,  
25      just trying to keep up to date and making sure



1 I'm getting everything completed.

2 Q. At some point in the fit for duty  
3 process, did you go to your chiropractor to use  
4 the fax machine to provide UH information?

5 A. Yes.

6 Q. What's the name of your  
7 chiropractor?

8 A. Tom Ormsby.

9 Q. Did anyone from UH request from you  
10 information from Tom Ormsby?

11 A. One of the forms in the fit for  
12 duty was to evaluate squatting, standing,  
13 sitting, and Dr. Traboulsi said he's in no --  
14 that's not his area of expertise for him to  
15 assess, and it was not done with Paul Bures, so  
16 I figured my chiropractor would be the next  
17 best person to evaluate that.

18 Q. That's a discussion you had with  
19 Dr. Traboulsi about the squatting, standing,  
20 sitting?

21 A. He said somebody else would need to  
22 evaluate that.

23 Q. Was, if you know, Dr. Traboulsi  
24 asking those questions because that information  
25 was on a return to work form that UH had

1 provided?

2 A. Right, I believe so, and he said he  
3 wasn't qualified to do that.

4 Q. Did you discuss with Georgene  
5 Kohlbacher or anyone else at UH whether they  
6 needed that information about squatting,  
7 standing, or sitting?

8 A. No. It was part of the packet, and  
9 I just presumed it had to be completed.

10 Q. Did anyone from UH ever discuss  
11 with you, either before or after Tom Ormsby  
12 provided that information, any restrictions or  
13 limitations you would have on squatting,  
14 standing, or sitting?

15 A. No.

16 Q. Did anyone ever ask you questions  
17 about that at all?

18 A. I don't believe so.

19 Q. What, if anything, did you fax to  
20 UH from Tom Ormsby's office?

21 A. Well, it would be whatever  
22 information you have. Offhand I don't recall.  
23 It was probably information that they needed,  
24 and that was the easiest way to get it to UH.

25 Q. So you used Tom Ormsby's fax

1 machine to provide information beyond Tom  
2 Ormsby's assessment of your squatting,  
3 standing, sitting; is that correct?

4 A. I'm not sure what else was included  
5 in the information he would have faxed over.

6 Q. While you were on the fit for duty  
7 process, were you continuing to be paid?

8 A. I was on administrative leave, yes.

9 Q. What was your understanding of  
10 administrative leave? What did that mean?

11 A. That they would pay me up to  
12 30 working days which for me was ten weeks  
13 because I only worked three days a week.

14 Q. Did you continue to receive your  
15 regular pay while you were on administrative  
16 leave from the initial fit for duty referral in  
17 February 2017 through the end of that process  
18 in June of 2017?

19 A. Yes.

20 Q. There was never a time where you  
21 weren't getting paid in that process?

22 A. I don't believe so.

23 Q. What benefits were you receiving at  
24 the time from UH in February of 2017?

25 A. There was the medical, the 401(k),

1 the HSA. Those are the main ones I can think  
2 of.

3 Q. You continued to receive those  
4 benefits from the time you were referred to the  
5 fitness for duty evaluation until June of 2017;  
6 is that right?

7 A. I believe so.

8 Q. I think you said on June 1st you  
9 had a meeting with Kathy Holley and Deb  
10 Sheldon; is that right?

11 A. Yes.

12 Q. Was there anyone else present for  
13 that meeting?

14 A. Georgene Kohlbacher.

15 Q. Can you tell me everything that you  
16 recall about that meeting?

17 A. Basically, that I think they had  
18 received all the paperwork, but they still have  
19 not come up with a decision. They hope to have  
20 one within the week, but they could  
21 basically -- I could resign, be terminated, or  
22 they can bring me back on a trial basis were  
23 the three options that came up.

24 Q. Did you express any desire or have  
25 the option to make a choice of one of those

1 three, or was that just what they told you?

2 A. Well, it was thrown out there. I  
3 certainly wasn't going to resign.

4 Q. Was there a discussion about the  
5 findings of Dr. Balciunas, Erin St. Denis, and  
6 Dr. Traboulsi during that June 1st meeting?

7 A. They may have been reviewed. I  
8 don't recall offhand.

9 Q. Do you recall in that meeting on  
10 June 1st being told that having another staff  
11 member in the group therapy room was not a  
12 reasonable accommodation at least in UH's  
13 belief?

14 A. Yes, even though at Richmond there  
15 is two staff to lead groups.

16 Q. In that June 1st, 2017, meeting,  
17 was it mentioned to you that Kathy and Deb  
18 Sheldon continued to have concerns about safety  
19 both for you and the patients?

20 A. Yes.

21 Q. And that they didn't believe any of  
22 the recommendations from either the physicians  
23 or occupational therapist would address those?

24 A. That's what they said.

25 Q. So is there anything else about the

1 June 1st meeting that you can recall?

2 A. I did inquire about other jobs  
3 within the hospital.

4 Q. What were you told?

5 A. That, yes, I could look for other  
6 positions that I would qualify for.

7 Q. Were you referred to a Career  
8 Pathways coach named Faye Naftzger?

9 A. Yes.

10 Q. Did you contact Faye?

11 A. Not initially.

12 Q. At what point did you contact Faye?

13 A. In March of this year.

14 Q. Why didn't you contact Faye between  
15 June of 2017 and March of 2019?

16 A. I wasn't sure in what way she might  
17 be able to help, and I was upset over the whole  
18 situation, and that I just was seeking  
19 assistance with Ohioans With Disabilities with  
20 my counselor there that I've worked with for  
21 numerous years.

22 Q. Is that Tim Sullivan?

23 A. Correct.

24 Q. Was Tim helping you look at the job  
25 postings at UH or discussing potential jobs at

1 UH Parma?

2 A. There may have been a few that  
3 we've looked up.

4 Q. Did you reach out to Deb Sheldon or  
5 Faye or anyone else at UH about those jobs?

6 A. I had asked Deb Sheldon if she  
7 would be able to send me openings or postings,  
8 and she said, no, I would need to go onto the  
9 website and look that up myself.

10 Q. Is that something that you were  
11 able to do?

12 A. With great difficulty.

13 Q. Do you know whether or not that is  
14 something that Faye Naftzger would be able to  
15 do is send you new job postings at Parma?

16 A. After having met with her last  
17 month, yes.

18 Q. Do you have any reason to believe  
19 she wouldn't have been able to do that for you  
20 in June of 2017?

21 A. No.

22 Q. You mentioned that one of the  
23 topics discussed in the June 2017 meeting was  
24 the potential to bring you back on a trial  
25 basis; is that right?

1           A.       Correct.

2           Q.       Bring you back meaning put you back  
3 as a rehabilitation therapist on the geriatric  
4 psych unit?

5           A.       Yes.

6           Q.       Was that something that you were  
7 open to or requested?

8           A.       I did not request it, and I would  
9 not be comfortable resuming that position after  
10 the issues with Kathryn Holley and the whole  
11 situation.

12          Q.       Why not?

13          A.       Because I believe I would be  
14 scrutinized even further. It's just a very  
15 awkward situation.

16          Q.       Is that what you conveyed to Kathy  
17 and Deb during that meeting?

18          A.       No, because they basically just  
19 laid out that that was what they were thinking,  
20 that there were the three options, and I may  
21 have said that I wouldn't resign, so that just  
22 left the other two, and nothing further was  
23 said. They would have their decision hopefully  
24 in another week.

25          Q.       Is there anything else about that



1 June meeting that you can recall?

2 A. No.

3 Q. When is the next time you had  
4 discussions with either Kathy or Deb or anyone  
5 from UH about the fit for duty process or your  
6 employment?

7 A. It was probably the following week  
8 or two.

9 Q. Who was the conversation with?

10 A. I want to say it was probably a  
11 phone call from Deb Sheldon stating that they  
12 were not going to bring me back, that my  
13 position as a rehabilitation therapist was not  
14 an option to resume.

15 Q. Is there anything else you can  
16 recall about that conversation?

17 A. Not that I recall.

18 Q. Did Deb advise you again at that  
19 time to reach out to Faye, the Career Pathways  
20 coach?

21 A. That I do not recall. I only seem  
22 to remember her name coming up in a letter in  
23 September of '17 when they gave me all the  
24 final details.

25 Q. How did you respond to Deb when she

1 told you you wouldn't be permitted to come back  
2 to your job?

3 A. I can't really recall. I guess,  
4 you know, it was just left at, all right,  
5 that's how they feel, you know. She said I  
6 could still continue to look for jobs, that  
7 they would again let me use my PTO time which  
8 would end in September.

9 I don't think until September did  
10 they decide then that once that PTO time ran  
11 out, I figured that would be the end, but they  
12 did send a letter then stating that they would  
13 keep me employed until December 31st without  
14 pay.

15 Q. Did you and Deb discuss on that  
16 phone call in June of 2017 the potential for  
17 you to be put on a medical leave of absence?

18 A. Yes. That did come up.

19 Q. Was that an option that you  
20 explored at all?

21 A. I looked at it and decided it was  
22 not beneficial to me. The wording in the  
23 letter asks for the doctor's reason for putting  
24 you on disability, and it would totally  
25 contradict that the doctors had all just stated

1       that I was fine to return to work.

2               Q.       Which doctors had stated that you  
3       were fine to return to work?

4               A.       I believe it was all of them;  
5       Traboulsi, Balciunas, and Bures.

6               Q.       After that phone conversation with  
7       Deb Sheldon in June of 2017, when was the next  
8       time you had any discussion with anyone from UH  
9       about your employment?

10              A.       There is probably a note somewhere.  
11      Offhand I don't recall.

12              Q.       After the in-person meeting in June  
13      of 2017, was there any further discussion that  
14      you had at any time with anyone from UH about  
15      potential reasonable accommodations that would  
16      allow you to continue to perform your job?

17              A.       No.

18              Q.       You said in September you received  
19      a letter from Deb Sheldon; is that right?

20              A.       I believe so.

21                      MS. WHITE: I can go ahead and read  
22      that letter to you.

23                      MR. BULEA: Let me just take a  
24      minute to look at it and see if I want to ask  
25      anything about it, but you can do that if you

1 want.

2 MS. WHITE: Yes. I'll go ahead and  
3 start the process.

4 (Discussion off record.)

5 - - - - -

6 (Thereupon, Deposition Exhibit 33, a  
7 Letter of 9/6/17 from Deborah  
8 Sheldon, was marked for purposes of  
9 identification.)

10 - - - - -

11 Q. Debbie, just while we were off the  
12 record, I just wanted to confirm that your  
13 counsel read to you and you heard and  
14 understood the letter that's dated  
15 September 6th, 2017, from Deb Sheldon to you  
16 that's now been marked as Defendant's  
17 Exhibit 33.

18 A. Correct.

19 Q. You received that letter sometime  
20 in early September 2017?

21 A. Yes.

22 Q. In this letter, as your counsel  
23 just read to you, Deb Sheldon stated that,  
24 "During the June 1st, 2017, meeting, you  
25 acknowledged the legitimacy of our safety

1 concerns, the increase in patient acuity, the  
2 increased severity of psychiatric issues, the  
3 change in patient demographics, increased code  
4 violets, and fewer staff to monitor patient  
5 activities and to deliver assistance during  
6 patient outbursts."

7 Did you acknowledge those things in  
8 the June 1st meeting?

9 A. Yes.

10 Q. In accordance with the letter, all  
11 of the PTO that you had was paid out by  
12 September 21st of 2017 or thereabouts; is that  
13 right?

14 A. Yes.

15 Q. You remained on as an employee of  
16 UH on a personal leave until the end of 2017;  
17 is that correct?

18 A. Yes.

19 Q. During that time you would have not  
20 been getting paid, but you would have received  
21 your medical benefits; is that right?

22 A. Correct.

23 Q. Between June of 2017 and the end of  
24 2017, did you apply for any other positions at  
25 UH?

1           A.       No.    There were none that were a  
2   fit as far as being part time, a day's shift,  
3   and something that I was qualified to do.

4           Q.       Were you also engaging in efforts  
5   to find employment outside of UH during that  
6   time?

7           A.       Yes.

8           Q.       Were there other jobs that you  
9   actually put in applications for during that  
10   time?

11          A.       Yes.

12          Q.       What were those?

13          A.       There were numerous jobs, nursing  
14   homes, assisted livings, customer service,  
15   daycare.

16          Q.       Did you receive any job interviews  
17   for any of those positions?

18          A.       I had an interview for a  
19   receptionist job at an assisted living facility  
20   that was going to be opening up.

21          Q.       Any other interviews?

22          A.       There may have been one or two  
23   other phone or in-person interviews.

24          Q.       Were you offered any positions?

25          A.       No.

1           Q.       Was the first job you were offered  
2       the one with Holy Family Daycare that you  
3       currently have?

4           A.       I was offered another job at  
5       another daycare, but I turned that one down  
6       because I had already visited Holy Family, I  
7       believe, and that was a better fit.

8           Q.       What was the pay at the other job  
9       that you turned down?

10          A.       I think it was less pay for more  
11       work.

12          Q.       More hours you mean?

13          A.       No.

14          Q.       Just like --

15          A.       Just more duties. I know another  
16       nursing home that I had contacted, you know,  
17       right away they asked, you know, my hourly  
18       rate, and they said, you know, there is no way  
19       they can come close to that, and I brought up  
20       another number, and that was \$15 an hour, and  
21       she said we can't even do that, you know. I  
22       tried to call back and, you know, negotiate  
23       further, but I never got any responses.

24                 I'm trying to think. I believe  
25       there was another interview, too, at another

1 nursing facility that I never heard back from  
2 and also again tried to reach out and never got  
3 any calls back.

4 Q. Did you ever apply I guess between  
5 June of 2017 and any time thereafter for Social  
6 Security disability benefits?

7 A. No.

8 Q. Were you receiving unemployment?

9 A. Yes.

10 Q. When did that start?

11 A. That kicked in at the end of  
12 September.

13 Q. After the PTO from UH ended?

14 A. Correct.

15 MR. BULEA: I'm just going to take  
16 a quick break.

17 (Brief recess.)

18 Q. In your earlier testimony, Debbie,  
19 you indicated that you believe that there were  
20 two recreational therapists that run the group  
21 therapy sessions at Richmond; is that right?

22 A. Correct.

23 Q. How did you come to learn that?

24 A. When I went there for my  
25 observation and spent the day with them and



1 asked them questions.

2 Q. Remind me, when was that?

3 A. June of probably '15 or '16.

4 Q. Are you aware of whether or not two  
5 recreational therapists continuing to operate  
6 the group therapy together as of June 2017?

7 A. I am not.

8 Q. During your time at Parma Medical  
9 Center after the acquisition by UH, at least in  
10 the Parma geriatric unit there was always only  
11 one recreational therapist on duty at a time,  
12 correct?

13 A. Initially when I started, I would  
14 say yes, there was only one. Sometimes we  
15 cotreated with OT or nursing, and then I think  
16 somewhere down the road there were two of us at  
17 times that would overlap, but then it basically  
18 came down to just one person at a time.

19 Q. When you say when I started, are  
20 you referring back to the late '90s?

21 A. Correct.

22 Q. So from the time that UH took over  
23 and acquired Parma sometime in 2014 forward,  
24 was it always that there was one recreational  
25 therapist on the geriatric psych unit at any

1 given time?

2 A. I believe so.

3 Q. You mentioned that you recently I  
4 guess met with Faye you said in March of 2019,  
5 Faye Naftzger?

6 A. Correct.

7 Q. What happened during that meeting?

8 A. We took an inventory survey to find  
9 out what my interests might be, and then I  
10 believe that feeds into UH jobs, so a few were  
11 identified there. I think one was a patient  
12 concierge, and one was another, I don't know  
13 what it was called, another patient like maybe  
14 rights, and then the daycare position came up  
15 there as well. So I did apply for that, and  
16 that also was one of the jobs that was sent by  
17 UH, one of four jobs that I said I'd be  
18 interested in and that I actually qualified for  
19 because the other three jobs sent by UH  
20 required education and training.

21 Q. Is the daycare position the only  
22 one you've applied for as of today?

23 A. Yes, because, again, it was the  
24 only one that fit my qualifications.

25 Q. Okay. The patient concierge or

1 patient rights positions, those were --

2 A. There were no openings at Parma.

3 Q. Are you going to continue to work  
4 with Faye such that she would notify you if any  
5 of those positions become available?

6 A. We didn't discuss any follow-up,  
7 but I could very well do that.

8 MS. WHITE: I haven't objected yet,  
9 but we're getting kind of close to that  
10 language.

11 MR. BULEA: Yes. That's fine. Let  
12 me ask it another way.

13 A. Maybe another thing I can add, too,  
14 is when you were asking about Tim Sullivan, I  
15 was working with Amy Rumrill, a vocational  
16 specialist, for jobs.

17 Q. After your meeting with Faye, when  
18 you left that meeting were there any further  
19 activities that you and she agreed to undertake  
20 either separately or together?

21 A. No. She just told me that I could  
22 go home and apply for that job.

23 Q. Have you received any response to  
24 that job application?

25 A. None. Again, that was one that was

1 sent initially to Emily and then forwarded to  
2 me, and I went back to Emily stating that the  
3 daycare job would be the most suitable, and we  
4 never heard back.

5 Q. When did you apply for that?

6 A. March 3rd or, I'm sorry, March 11th  
7 I believe it was. Did you want to know other  
8 results of jobs like from this year if I had  
9 interviews? I know you had asked.

10 Q. Yes. Are you still actively  
11 looking for work outside of the daycare?

12 A. Yes.

13 Q. Where have you looked?

14 A. It was Royalton Woods Assisted  
15 Living. I had an interview there. They chose  
16 somebody else. I interviewed at another  
17 daycare that was closer to home, and, again,  
18 they chose somebody else.

19 Q. Are there any other jobs that  
20 you've currently applied for but are still  
21 waiting to hear back from other than the one at  
22 UH?

23 A. No.

24 - - - - -

25 (Thereupon, Deposition Exhibit 34, a

1 Document Bates Labeled Moss  
2 Production 000941 through 000948,  
3 was marked for purposes of  
4 identification.)

5 - - - - -

6 Q. I'm going to hand to your counsel  
7 what I've marked as Defendant's Exhibit 34.  
8 Again, I certainly don't need you to read the  
9 whole thing, so I'll direct you to the page  
10 that I have specific questions about, and  
11 hopefully we can speed things up. The Bates  
12 number is Moss Production 946.

13 Generally, I'll just say this is a  
14 document that was produced to me in this  
15 litigation by your counsel, so I know that,  
16 Debbie, you probably don't have the equipment  
17 needed to identify it.

18 MR. BULEA: But, Emily, if you're  
19 able to identify it for the record, that would  
20 be helpful.

21 MS. WHITE: So which part were you  
22 going to ask her about because I'd be happy to  
23 read that section.

24 MR. BULEA: The first question  
25 would be to identify it, and the second

1 question is going to be about the top portion  
2 of Bates number 946 under the other comments  
3 section.

4 MS. WHITE: Okay.

5 (Discussion off record.)

6 Q. So the first question I have about  
7 Defendant's Exhibit 34, which I understand is  
8 an application that you made in January of 2017  
9 with Opportunities for Ohioans with  
10 Disabilities, is I guess, first, do you recall  
11 making such an application in or around January  
12 of 2017?

13 A. I believe so.

14 Q. Was this application in conjunction  
15 with your efforts to obtain an updated closed  
16 circuit television?

17 A. I'm not sure if it was for that or  
18 something else needed for the computer,  
19 possibly a new computer keyboard. I don't  
20 recall specifically.

21 Q. As to the specific page 946, there  
22 is a comment here that your vision is getting  
23 worse and vision now requires bigger and darker  
24 (more contrast) than before.

25 My question, if you know, is what

1 the reference point for that comment would be,  
2 and if you know whether that comment refers to  
3 some previous point in time comparing your  
4 vision getting worse.

5 A. I would write out in large print  
6 things that I would discuss with the patients,  
7 and over 20 years that's changed.

8 Q. So my question is really as of  
9 January 2017, is your vision still getting  
10 worse at that point?

11 A. From 1996 it had.

12 Q. Okay. How about from 2015?

13 A. I can't say.

14 Q. Do you believe your vision is still  
15 getting worse as we move forward to today?

16 MS. WHITE: I'll object, asked and  
17 answered. You can answer.

18 A. I mean, aging issues? I don't  
19 know. I would say for the most part it seems  
20 to be the same.

21 - - - - -

22 (Thereupon, Deposition Exhibit 35, a  
23 Document Bates Labeled Moss  
24 Production 000793 through 000879 and  
25 000393, was marked for purposes of

1 identification.)

2 - - - - -

3 Q. I'm handing you what's been marked  
4 as Defendant's Exhibit 35, and I believe this,  
5 and I'll let your counsel comment as well, this  
6 to be the case notes for you from Opportunities  
7 for Ohioans With Disabilities that were  
8 maintained by Tim Sullivan and provided to me  
9 in this litigation.

10 (Discussion off record.)

11 Q. So I'm going to ask you a few  
12 questions about some specific pages now,  
13 Debbie, in the case notes from Tim Sullivan  
14 which I know you haven't seen. The first Bates  
15 number that I have questions about is Moss  
16 Production 808. It's really the question I  
17 have is about Section 2, the note summary.

18 MS. WHITE: Off the record.

19 (Discussion off record.)

20 Q. Debbie, I just want to confirm that  
21 you had the opportunity to listen to your  
22 counsel read the Section 2, note summary, from  
23 document Bates numbered Moss Production 808 of  
24 Exhibit 35.

25 A. Yes.



1           Q.     Is that summary that your counsel  
2     just read to you a synopsis of a voicemail that  
3     you left for Mr. Sullivan in February of 2017?

4           A.     It appears to be.

5           Q.     Is that what you told Mr. Sullivan,  
6     that you were initially okay with this referral  
7     because you thought of it as a way to get the  
8     items you needed?

9           A.     I don't recall that particularly,  
10    but Tim has always been helpful in being able  
11    to get what I need for work.

12          Q.     It's also noted here by Tim that  
13    you conveyed your belief that this all, meaning  
14    the mandatory fit for duty process, came about  
15    when University Hospitals absorbed Parma  
16    Hospital where you work. Is that still your  
17    belief?

18          A.     More particularly with Kathy Holley  
19    in 2016.

20          Q.     The next page I have a question  
21    about is Bates numbered 810. Again, it's under  
22    Section 2, notes, and it appears to be an email  
23    from Debbie Moss to Tim Sullivan.

24                 MS. WHITE: If we can go off the  
25    record for a second.

1 (Discussion off record.)

2 Q. Debbie, did you have the chance to  
3 read the email that you sent on or around  
4 March 9th, 2017, to Tim Sullivan as just read  
5 by your counsel and conveyed on document Bates  
6 numbered 810 as part of Exhibit 35?

7 A. Yes.

8 Q. Is that an email that you would  
9 have sent to Tim at that time?

10 A. Yes.

11 Q. A couple of questions. Do you know  
12 which coworker it was that called?

13 A. Possibly Joy Rivera.

14 Q. Do you know what questions she had  
15 for you or what you discussed?

16 A. I believe she just reached out to  
17 me to see what was going on, why I wasn't at  
18 work.

19 Q. Was Joy conveying some it sounds  
20 like stress she was having with conversion to  
21 the UH computer system?

22 A. That's what it sounds like.

23 Q. You say, "I am enjoying my 20-year  
24 sabbatical." What did you mean by that?

25 A. It's a good question because I

1 don't really recall that, but I guess after  
2 having worked for 20 years and just getting a  
3 little bit of time off.

4 Q. You also stated that your eye  
5 doctor referred you to the low vision clinic at  
6 the Sight Center, and they are certainly all on  
7 the wrong pages. What did you mean by that?

8 A. There was a lot of  
9 miscommunication, and specifically I don't  
10 recall offhand, but I had called -- I know the  
11 referral was made to see Erin, the OT, and it  
12 was just the Sight Center not passing the  
13 information on to the right person initially  
14 and waiting on phone calls, so that eventually  
15 that process got cleared up, but it took a  
16 couple weeks to figure out what was going on.

17 Q. Okay. This is not something you  
18 are blaming or attributing to UH?

19 A. No, not at all.

20 Q. You're not conveying here that you  
21 think anyone either at the Sight Center or  
22 Dr. Traboulsi or any of the other physicians  
23 made any mistakes in their assessments or  
24 anything like that?

25 A. No.

1           Q.     Did Tim Sullivan refer you to  
2 anyone to help you with your job search?

3           A.     Yes. He gave me a couple  
4 vocational specialists to interview and decide  
5 which one I'd like to work with.

6           Q.     Who were those people?

7           A.     Well, I chose Amy Rumrill. I don't  
8 know who the other one was offhand.

9           Q.     Did you I don't know if engage is  
10 the right word, but did you work with Amy to  
11 get her assistance in trying to locate a  
12 position?

13          A.     A position?

14          Q.     A new job.

15          A.     Yes.

16          Q.     Was she able to help you?

17          A.     Yes.

18          Q.     How did she help?

19          A.     We worked on updating my resume,  
20 which didn't need too much updating as Kathryn  
21 Holley had needed a new one, I believe, as of  
22 January '17, looking for jobs, applying for  
23 jobs.

24          Q.     Are you still working with Amy?

25          A.     No.

1 Q. When did you stop?

2 A. Maybe, I don't know, January,  
3 February of '18 maybe.

4 Q. What caused you to stop working  
5 with Amy?

6 A. At that time a lot of the jobs that  
7 we were applying for were very low paying jobs,  
8 and I was still on unemployment, so it wouldn't  
9 have been -- I would have taken a significant  
10 cut in pay to take a job at lower pay versus  
11 collecting my unemployment.

12 Q. Okay. So if I'm understanding you  
13 correctly, the jobs Amy was finding were all  
14 lower paying than the amount you were receiving  
15 from unemployment; is that right?

16 A. Correct.

17 Q. As a result of that, did Amy  
18 basically say I'm not able to find a job that's  
19 going to fit your requirements, or how did that  
20 end?

21 A. It ended that we would resume once  
22 my unemployment ran out if I still needed  
23 assistance.

24 Q. Okay. When did your unemployment  
25 run out?

1           A.       The end of March, I believe, of  
2       '18.

3           Q.       Did you reach back out to Amy at  
4       that time?

5           A.       I had not because I had gotten the  
6       job at Holy Family, was offered the job there.  
7       What I was able to do versus what Amy was able  
8       to do, you know, I could still look for work on  
9       my own and not to have OOD having to spend the  
10      money for her to somewhat do the same thing  
11      because pretty much the only job market that  
12      would pay what I was making would be another  
13      hospital.

14          Q.       Did you contact Dr. Fox or  
15      Dr. Polster at Southwest about potentially  
16      working with them?

17          A.       No.

18          Q.       Is there any specific reason why  
19      you wouldn't have done that?

20          A.       Accessibility to get to Southwest.

21          Q.       Where do they work? What's their  
22      location for Southwest?

23          A.       It's in Middleburg Heights.

24          Q.       So you're not able to get  
25      transportation there?

1           A.       Correct.

2           Q.       How were you getting to and from  
3       Parma Medical Center?

4           A.       To the hospital?

5           Q.       Yes, when you were working for UH  
6       at Parma.

7           A.       Well, at one point it was some  
8       neighbors would take me to the bus stop and  
9       then the bus in. Then that transportation was  
10      cut off. So then it was RTA had a contract  
11      with another Provide-a-Ride service, so, again,  
12      a neighbor or family member to that location,  
13      and then they would take me to work.

14                   Then just through some  
15      advertisements I was able to find a person that  
16      worked in the general vicinity that could pick  
17      me up from home and take me, and coming home  
18      was always usually my husband.

19           Q.       Did you not believe you could make  
20      a similar arrangement to Middleburg Heights if  
21      you were to work at Southwest, or have you even  
22      explored the possibility?

23           A.       No. It's much further out, and  
24      that would require more assistance in both  
25      directions.

1           Q.     Do you recall completing responses  
2     to some written questions that were asked by UH  
3     in the course of this litigation? They are  
4     called interrogatories.

5           A.     Yes.

6           Q.     I'm going to ask you some questions  
7     about those. One of the interrogatories asked  
8     you to identify people who you believe have  
9     knowledge of the facts in your complaint or the  
10    damages that you suffered as alleged in this  
11    case, and I'm just going to ask you what  
12    knowledge you think some of these people have.

13                   It looks like a good number of them  
14    we already covered including Marlene Kiel,  
15    Lindsay Kingery, Corey Kramer, Daniela Magda,  
16    Nicolette Mullinax. Those would be the nurses  
17    at Parma; is that right?

18          A.     Yes.

19          Q.     Would they have any specific  
20    knowledge of the facts of your claim other than  
21    being present in the workplace?

22          A.     Not that I communicated with them,  
23    no.

24          Q.     Have you talked with any of them  
25    about the case?



1 A. I have not.

2 Q. Who is Jessica DiMassa?

3 A. She's a nursing assistant, PCA.

4 Q. At Parma?

5 A. Yes.

6 Q. Have you spoken with her about the  
7 case?

8 A. No.

9 Q. Is she listed here because she  
10 would have general knowledge of the work  
11 environment?

12 A. Yes.

13 Q. Anything more specific than that?

14 A. No.

15 Q. How about Jennifer English?

16 A. The same.

17 Q. Courtney Holbrook?

18 A. The same.

19 Q. Vanessa McCoy?

20 A. The same.

21 Q. Candace Miles?

22 A. The same.

23 Q. Kathryn Holley I know. Allison  
24 Henton-Fisher, that would be your prior  
25 supervisor?

1 A. Correct.

2 Q. Have you spoken with her about the  
3 lawsuit?

4 A. I have not.

5 Q. Chrissy Rivera, she was the  
6 assistant?

7 A. Yes.

8 Q. And Joy Rivera?

9 A. Is my coworker.

10 Q. She's a recreational therapist?

11 A. She's a music therapist.

12 Q. Have you spoken with her about the  
13 lawsuit?

14 A. I don't know specifically if I  
15 mentioned that I was suing.

16 Q. Are you still in regular contact  
17 with her?

18 A. No.

19 Q. When is the last time you spoke  
20 with her?

21 A. Maybe, I'm not sure when I cleaned  
22 out my office, June of '18.

23 Q. Okay. Carol Biernacki, who is  
24 that?

25 A. She's an occupational therapist.

1 Q. At UH Parma?

2 A. Yes.

3 Q. Is there any specific knowledge she  
4 would have?

5 A. She's just a coworker.

6 Q. No specific knowledge she would  
7 have about the case?

8 A. No.

9 Q. Katie Metzger, who is that?

10 A. Another former coworker, and she  
11 had been filling in prn once they let me go.

12 Q. Filling in meaning performing the  
13 duties you used to perform?

14 A. Correct, just like maybe once a  
15 month. I don't know what her schedule was.

16 Q. Have you spoken with her about the  
17 lawsuit?

18 A. I'm not sure if I mentioned that to  
19 her or not.

20 Q. When is the last time you spoke  
21 with Katie?

22 A. I ran into her at a function in  
23 October of '18.

24 Q. Did you discuss the lawsuit?

25 A. I don't recall.

1 Q. How about Mike Wagner, who is he?

2 A. A former supervisor before Allison.

3 Q. Have you spoken with him about the  
4 lawsuit?

5 A. No.

6 Q. Who is Linda Roberts?

7 A. A retired social worker from the  
8 unit.

9 Q. When did she retire?

10 A. Probably sometime in maybe the  
11 summer of '16.

12 Q. How about Ella Wagner?

13 A. A former coworker, no  
14 communication.

15 Q. Dr. Sanitato, who is he or she?

16 A. He's the psychiatrist.

17 Q. The psychiatrist?

18 A. The current psychiatrist at UH.

19 Q. Is that different than Sanitato?

20 A. It's the same.

21 Q. They are just spelled differently  
22 here, so it's the same person?

23 MS. WHITE: That's on me. Sorry.

24 Q. But it's the same person?

25 A. No. Correct.

1           Q.     There is only one of them however  
2 they spell their name?

3           A.     Yes.

4           Q.     Jeri Novicky, I think she was  
5 someone you talked to about the copier?

6           A.     She's the secretary at UH, the  
7 secretary to the unit.

8           Q.     Other than the conversation about  
9 the copier, is there any other specific  
10 information she would have about the lawsuit?

11          A.     No.

12          Q.     Have you spoken with her about the  
13 lawsuit?

14          A.     No.

15          Q.     Diane Levi, who is she?

16          A.     She's a former public relations  
17 person on the unit. Again, I have had no  
18 communication with her.

19          Q.     So just general knowledge of the  
20 unit's operation?

21          A.     Yes.

22          Q.     You have listed here your husband,  
23 William Moss, and two children, Kyle and Tyler?

24          A.     Correct. Yes.

25          Q.     I assume they would have knowledge

1 of how this has impacted your life; is that  
2 right?

3 A. Yes.

4 Q. I know it's not the easiest topic,  
5 but if you can, just tell me how this has  
6 impacted your life.

7 A. Well, I mean, huge. I mean,  
8 financially is number one. Not being able to  
9 do a job that I went to school for and figured  
10 I'd be doing until I retired. Self-esteem,  
11 anxiety, just, I mean, all the things that come  
12 with a drastic change in lifestyle. I mean,  
13 going from a structured schedule to not so much  
14 structured or going from working three days a  
15 week to sometimes five days a week for less  
16 money. You know, the decrease in contributions  
17 to my 401(k) for preparing for retirement. My  
18 traveling, vacations are limited to little.

19 Q. Have you sought -- I'm sorry. I  
20 don't mean to cut you off. Did you have  
21 anything else?

22 A. Not that I can think of.

23 Q. Have you sought any treatment,  
24 either mental health or otherwise, for any of  
25 the anxiety or other issues you just described?

1 A. No.

2 Q. You have I think a couple people  
3 here you referenced as longtime friends,  
4 Patricia Kimnach and Connie King. Would their  
5 testimony be the same as to the impact on your  
6 life?

7 A. Yes.

8 Q. Anything beyond that?

9 A. No.

10 Q. Renee Buchtel, the current  
11 employer, is that the Renee who is your  
12 supervisor at Holy Family?

13 A. Yes. She doesn't know I'm involved  
14 in a lawsuit.

15 Q. We did receive some voided pay  
16 stubs. Did you receive a W-2 or end-of-year  
17 tax statement from Holy Family Daycare for  
18 2018?

19 A. That's this current year?

20 Q. Last year.

21 A. Right, but would be received for  
22 this year. I'm not sure. My husband does all  
23 the taxes.

24 Q. Okay. I would imagine you probably  
25 did.

1 MR. BULEA: If it's not too much  
2 trouble --

3 MS. WHITE: We'll follow up.

4 MR. BULEA: -- if you could provide  
5 it rather than having a bunch of different  
6 checks, that would be great. Thank you.

7 THE WITNESS: Did you just need  
8 that emailed to you then?

9 MS. WHITE: We'll discuss it when  
10 we get off the record.

11 Q. In one of your interrogatory  
12 responses, you indicate that in September  
13 someone from UH HR called and asked you how you  
14 were planning to pay for health benefits  
15 through the end of 2017. Were you charged for  
16 your health benefits through the end of 2017 by  
17 UH?

18 A. I do not believe so. Whoever it  
19 was that called, I told them I would not be  
20 paying.

21 Q. And they --

22 A. There was never a response back.

23 Q. Certainly, the health care remained  
24 in place, correct?

25 A. Yes.



1           Q.     Did you have a conversation with  
2     anyone from UH in January of 2018 about the end  
3     of your employment?

4           A.     I don't believe so.

5           Q.     Did you receive a letter from Deb  
6     Sheldon that notified you that you would be no  
7     longer employed by UH?

8           A.     I know that letter came in  
9     September. I don't know about after January of  
10    '18.

11                   -   -   -   -   -

12                   (Thereupon, Deposition Exhibit 36, a  
13                   Document Bates Labeled UH-MOSS 1388,  
14                   was marked for purposes of  
15                   identification.)

16                   -   -   -   -   -

17                   (Discussion off record.)

18           Q.     Back on. Debbie, were you able to  
19     listen to the letter that's now been marked as  
20     Defendant's Exhibit 36 which your counsel just  
21     read for you?

22           A.     Yes.

23           Q.     The letter is dated January 28th,  
24     2018. Do you recall receiving this letter  
25     around that time?

1           A.       Yes.

2           Q.       As you heard, there was a phone  
3 call sometime in early January that you had  
4 with Deb Sheldon. Do you remember that call?

5           A.       I do not.

6           Q.       Did Kathy Holley or anyone else  
7 employed by UH ever make any derogatory  
8 statements to or towards you about your  
9 disability?

10          A.       I don't believe so.

11          Q.       Did you ever hear, even if it's  
12 secondhand or a rumor, that any such comments  
13 were made by Kathy or anyone else at UH?

14          A.       I don't believe so.

15          Q.       I know we've talked today about the  
16 referral for the fitness for duty process,  
17 going through and ultimately not being  
18 permitted to return to your position as a  
19 rehabilitation therapist, and I know that forms  
20 the basis for your claims in the lawsuit.

21                 Are there any other employment  
22 related decisions that UH made that you believe  
23 were discriminatory based on your disability or  
24 vision impairment?

25          A.       Not that I can think of.

1 MR. BULEA: We'll take about five  
2 minutes. I'm going to look through my notes.

3 (Brief recess.)

4 MR. BULEA: I think we're done.

5 MS. WHITE: We will be reading.

6 (Deposition concluded at 3:54 p.m.)  
7  
8  
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1 Whereupon, counsel was requested to give  
2 instruction regarding the witness's review of  
3 the transcript pursuant to the Civil Rules.

4  
5 SIGNATURE:

6 Transcript review was requested pursuant to the  
7 applicable Rules of Civil Procedure.

8  
9 TRANSCRIPT DELIVERY:

10 Counsel was requested to give instruction  
11 regarding delivery date of transcript.

12 Mr. Bulea ordered the original  
13 transcript for expedited delivery on 4/12/19.

14 Ms. White did not order a copy at  
15 this time.

REPORTER'S CERTIFICATE

The State of Ohio, )

SS:

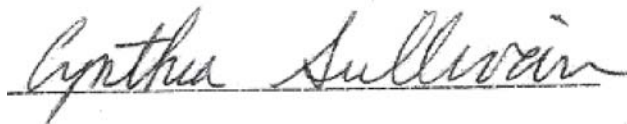
County of Cuyahoga. )

I, Cynthia Sullivan, a Notary Public within and for the State of Ohio, duly commissioned and qualified, do hereby certify that the within named witness, DEBORAH A. MOSS, was by me first duly sworn to testify the truth, the whole truth and nothing but the truth in the cause aforesaid; that the testimony then given by the above-referenced witness was by me reduced to stenotypy in the presence of said witness; afterwards transcribed, and that the foregoing is a true and correct transcription of the testimony so given by the above-referenced witness.

I do further certify that this deposition was taken at the time and place in the foregoing caption specified and was completed without adjournment.

1 I do further certify that I am not  
2 a relative, counsel or attorney for either  
3 party, or otherwise interested in the event of  
4 this action.

5 IN WITNESS WHEREOF, I have hereunto  
6 set my hand and affixed my seal of office at  
7 Cleveland, Ohio, on this 12th day of  
8 April, 2019.

9  
10  
11  
12   
13

14 Cynthia Sullivan, Notary Public  
15 within and for the State of Ohio  
16

17 My commission expires October 17, 2021.  
18  
19  
20  
21  
22  
23  
24  
25

Veritext Legal Solutions  
1100 Superior Ave  
Suite 1820  
Cleveland, Ohio 44114  
Phone: 216-523-1313

April 12, 2019

To: Ms. White

Case Name: Moss, Deborah v. University Hospitals at Parma Medical  
Center

Veritext Reference Number: 3282489

Witness: Deborah A. Moss                      Deposition Date: 4/8/2019

Dear Sir/Madam:

The deposition transcript taken in the above-referenced  
matter, with the reading and signing having not been  
expressly waived, has been completed and is available  
for review and signature. Please call our office to  
make arrangements for a convenient location to  
accomplish this or if you prefer a certified transcript  
can be purchased.

If the errata is not returned within thirty days of your  
receipt of this letter, the reading and signing will be  
deemed waived.

Sincerely,

Production Department

NO NOTARY REQUIRED IN CA

DEPOSITION REVIEW  
CERTIFICATION OF WITNESS

ASSIGNMENT REFERENCE NO: 3282489

CASE NAME: Moss, Deborah v. University Hospitals at Parma  
Medical Center

DATE OF DEPOSITION: 4/8/2019

WITNESS' NAME: Deborah A. Moss

In accordance with the Rules of Civil  
Procedure, I have read the entire transcript of  
my testimony or it has been read to me.

I have made no changes to the testimony  
as transcribed by the court reporter.

\_\_\_\_\_  
Date Deborah A. Moss

Sworn to and subscribed before me, a  
Notary Public in and for the State and County,  
the referenced witness did personally appear  
and acknowledge that:

They have read the transcript;

They signed the foregoing Sworn  
Statement; and

Their execution of this Statement is of  
their free act and deed.

I have affixed my name and official seal

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission Expiration Date



DEPOSITION REVIEW  
CERTIFICATION OF WITNESS

ASSIGNMENT REFERENCE NO: 3282489

CASE NAME: Moss, Deborah v. University Hospitals at Parma  
Medical Center

DATE OF DEPOSITION: 4/8/2019

WITNESS' NAME: Deborah A. Moss

In accordance with the Rules of Civil  
Procedure, I have read the entire transcript of  
my testimony or it has been read to me.

I have listed my changes on the attached  
Errata Sheet, listing page and line numbers as  
well as the reason(s) for the change(s).

I request that these changes be entered  
as part of the record of my testimony.

I have executed the Errata Sheet, as well  
as this Certificate, and request and authorize  
that both be appended to the transcript of my  
testimony and be incorporated therein.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Deborah A. Moss

Sworn to and subscribed before me, a  
Notary Public in and for the State and County,  
the referenced witness did personally appear  
and acknowledge that:

They have read the transcript;  
They have listed all of their corrections  
in the appended Errata Sheet;  
They signed the foregoing Sworn  
Statement; and  
Their execution of this Statement is of  
their free act and deed.

I have affixed my name and official seal  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission Expiration Date

ASSIGNMENT NO: 3282489

PAGE/LINE (S)	CHANGE	/REASON
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DAY OF \_\_\_\_\_, 20\_\_\_\_.

Notary Public

Commission Expiration Date

[&amp; - 6th]

Page 1

<b>&amp;</b>	<b>15</b> 69:2 93:14	<b>2015-16</b> 20:25	<b>3</b>
<b>&amp;</b> 1:20 2:13	114:17,18 139:20	<b>2016</b> 20:14 21:6	<b>30</b> 4:4 103:13,15
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Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.

THE ABOVE RULES ARE CURRENT AS OF SEPTEMBER 1, 2016. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS  
COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

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03/22/2017 15:56 Cleveland Sight Center - LVC

(FAX) 2166588731

P.005/007

02/16/2017 THU 15:58 FAX 216 445 2226 B4697

02/15/025

University Hospitals 2/16/2017 11:58:50 AM PAGE 6/018 Fax Server

DEFENDANT'S  
EXHIBIT

29

CS

Provider's name and business address:

LIDIJA BALCIUNAS, OD

1909 E. 101<sup>st</sup> St  
CLEVELAND, OH  
44106

Type of practice / Medical specialty:

OPTOMETRIST

CLEVELAND SIGHT CENTER

Telephone: (216) 658-8732

Fax: (216) 658-8731

## 2A. MEDICAL FACTS

Approximate date condition commenced: 1976

Probable Duration of condition: PERMANENT

Date(s) you have treated patient for condition in the past 12 months: N/A (LAST APPOINTMENTS: 3/21/17 AND 1/4/18)

Was patient admitted for overnight stay in hospital, hospice or residential medical care facility? Yes ☒ No

If yes, Inpatient Stay: (Date Admitted) \_\_\_/\_\_\_/\_\_\_

Will the Employee need to have treatment visits at least twice per year due to the condition? Yes ☒ NoWas medication, other than over-the-counter medication, prescribed? Yes ☒ No

Was the patient referred to other health care provider(s) for evaluation/treatment (e.g., physical therapist, specialist)?

Yes ☒ No ☒ If so, state the nature and dates of such treatments and expected duration of treatment.Is the medical condition pregnancy? Yes ☒ No ☒ If yes, expected Date of Delivery: \_\_\_/\_\_\_/\_\_\_

If the employer provides a list of the employee's essential functions or a job description, answer these questions based upon that list. Otherwise, rely on the employee's own description of his/her job functions:

Is the employee unable to perform any of his/her job functions due to the condition? Yes ☒ No ☒ If so, identify the job functions the employee is unable to perform: FACIAL RECOGNITION EXPRESSIONS, SIGNING TREATMENT PLANS.

WHEN NOT NEAR CCTV SEEING IN POOR CONTRAST ENVIRONMENTS, MAY NOT ALWAYS HAVE VISUAL AWARENESS OF EVERYTHING GOING ON IN A ROOM. USES OTHER CUES TO GATHER INFORMATION

Describe the other relevant medical facts, related to the condition for which the employee seeks leave (such medical facts may include symptoms, diagnosis, or any regimen of continuing treatment such as the use of specialized equipment) that are sufficient to establish the need for the patient to take leave (including any need for the intermittent absences or for work on a part-time or reduced schedule).

MS. DEBORAH MOSS WOULD LIKE TO CONTINUE WORKING - LEAVE WAS  
RECOMMENDED BY EMPLOYER

## 2B. AMOUNT OF LEAVE NEEDED (Single Continuous Period, Follow-up &amp; Reduced Schedule, or Intermittent)

Single continuous period of incapacity

Will the employee be unable to perform some or all of his/her job functions for a single continuous period of time due to his/her medical condition, including any time for treatment and recovery? Yes ☒ No ☒ If so, provide the estimated beginning and ending dates for the period the employee is expected to be unable to perform some or all of his/her job functions: \_\_\_/\_\_\_/\_\_\_ +

THE VISUAL CONDITION IS PERMANENT + STABLE, NOT AN ACUTE CONDITION IN NEED OF TREATMENT FOR RECOVERY.

Follow-up or Part-time/Reduced Work Schedule

Will it be medically necessary for the employee to take leave to attend follow-up appointments and/or work part time or on a reduced schedule because of the medical condition? Yes ☒ No

21 Page

WITH APPROPRIATE ADAPTATIONS, INCLUDING ACCESS TO TOPAZ CCTV  
HER SPECIALIZED CLASSIC+ZOOM TEXT TALKING SOFTWARE, MS. MOSS MAY BE  
ABLE TO CONTINUE WORKING PART TIME WITH SUPPORT  
FROM OTHER STAFF MEMBERS WHEN NEEDED. ALL OF THE  
EMPLOYMENT RELATED VARIABLES AND NECESSARY FACTORS CANNOT BE DETERMINED/  
FULLY ASSURED BY MY ASSESSMENT. VISUAL ACUITY IS SEVERELY REDUCED,  
BUT MS. MOSS HAS BEEN WORKING WITH THIS CONDITION FOR  
MANY YEARS IN HER CURRENT CAPACITY.

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UH-MOSS 1361



03/22/2017 15:56 Cleveland Sight Center - LVC

(FAX) 2166588731

P.006/007

02/16/2017 THU 15:58 FAX 216 445 2226 H4697

02/16/025

University Hospitals 2/18/2017 11:56:50 AM PAGE 9/018 Fax Server

If so, provide information sufficient to establish the medical necessity for such leave:

If there is a medical necessity for follow-up treatment appointments, what is the estimated treatment schedule, including the dates of any scheduled appointments and the amount of employee time off required for each appointment, including any recovery period:

FOLLOW UP APPOINTMENTS NOT

INDICATED AT THIS TIME WITH ME.

MS. MOSS MAY NEED FOLLOW UP APPOINTMENTS WITH HER GVI COUNSELOR TIM SULLIVAN

If there is a medical necessity that the employee work on a part-time or reduced schedule, estimate the part-time or reduced work schedule the employee needs: hour(s) per day: days per week from through

MS. MOSS WORKS 24 HRS/WK 3 TIMES PER WEEK (3 DAYS EACH WEEK)

Intermittent Leave

AND FEELS COMFORTABLE WITH THAT SCHEDULE

Will the condition intermittently prevent the employee from performing some or all of his/her essential job functions? Yes

No

AS NOTED, CERTAIN JOB FUNCTIONS ARE CHALLENGING DUE TO LOSS OF CENTRAL VISION SUCH AS FACIAL RECOGNITION + EXPRESSIONS INTERPRETATION

If so, provide information sufficient to establish the medical necessity for such intermittent leave:

Based upon the employee's medical history and your knowledge of the medical condition, estimate the frequency and the duration of the employee's intermittent inability to perform some or all of his/her job functions over the next 6 months (e.g., 1 episode every 3 months lasting 1-2 days):

Frequency: times per week(s) month(s)

Duration: hours or day(s) per episode:

I AM UNABLE TO COMPLETE THIS PORTION IN THE MANNER REQUESTED

Estimated duration of the need for intermittent leave:

Signature of Physician/Practitioner:

Date: / /

Print Name: LIDITA BALCUNAS, OD. Fax #: (216) 658-8731

Field of Specialization: LOW VISION OPTOMETRIST Phone #: (216) 658-8732

Address: 1901 E. 101st St. City/State/Zip: CLEVELAND OH 44106

Please review contact information below and fax this form to the appropriate team member based on the entity of employment:

Should you have any questions please call Disability Management Services at 216-767-8700 and follow the prompts to speak with a team member. Thank you.

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UH-MOSS 1362



University Circle  
1909 East 101<sup>st</sup> Street  
Cleveland, OH 44106-4110  
216-791-8118  
clevelandsightcenter.org

Highbrook Lodge  
12944 Aquilla Road  
Chardon, OH 44024

### Occupational Therapy Low Vision Evaluation Report

Client: Deborah Moss

DOB: 5/31/65

Occupational Therapist: Erin St. Denis, OTR/L

Date of Occupational Therapy Visit: 4/5/17

Referral Source: Community Referral, University Hospitals



OT received a referral for Ms. Moss to complete a Functional Low Vision Assessment related to work. Dr. Balciunas, Cleveland Sight Center's low vision optometrist, evaluated Ms. Moss on 3/21/17. Ms. Moss has a vision diagnosis significant for Stargardt's Disease with visual acuities of 1/100 OU and a near visual acuity of J16 aided. Dr. Balciunas reported that, "Stargardt's disease is a condition that permanently diminishes central vision both distance and near. It does not affect peripheral vision. It is a progressive condition, but Ms. Moss is not likely to get much worse at this point of the condition." Ms. Moss also reports postural strain and spinal concerns related to her positioning at her work station. She may benefit from an ergonomic evaluation of her work station.

Ms. Moss has worked for 20 years as a recreation therapy assistant on the geriatric psych floor at the Parma branch of University Hospitals. She reports she has been an employee of University Hospitals since 2014. She reports that there have been some changes in the population served; now serving a younger geriatric population. While she was previously assessed and accommodation recommendations were made, there are some continued concerns.

OT called and spoke with Georgene Kohlbacher, EAP Counselor, and requested a second visit for OT to observe and further assess how Ms. Moss functions in her daily routine in her work setting. Ms. Kohlbacher reported back that this request was not able to be accommodated due to HIPAA regulations. OT explained report would be completed with information from 4/5/17 visit, she reported this would be fine.

OT assessed Ms. Moss for CCTV technology. Ms. Moss reports that a Topaz CCTV (closed circuit television or "magnifying television") was recommended in the past and she received a Merlin. She reports the contrast of the Merlin model is not as good as the Topaz (she has a Topaz at home). OT assessed patient this date with CCTV technology. Patient uses reverse contrast with font size magnified to 5 inches. Quality of contrast was assessed to be an important variable to crisp edges of letters for



improved ease and speed of reading. The Topaz model with 24" monitor was beneficial. A DaVinci model with audible text mode was also demonstrated and helpful. If considered, Ms. Moss would benefit from further assessment. Ms. Moss reported she used to have a scanner to convert printed materials to audible text. She reported this device was helpful for reading printed materials.

Ms. Moss reported she is a proficient Zoom Text user and has a computer with large monitor and adaptive keyboard at her work station. She reported that Zoom text has not been working well at work and is hopeful with UH software updates, the function of her Zoom Text software will improve. Ms. Moss would benefit from UH's IT department to address Zoom Text compatibility with software. She currently uses volunteers to assist her reading e-mails. Ms. Moss reported that UH may be utilizing iPads in the future. The iPad would offer a high degree of portability between work stations and possibly complete documentation outside of the office. With low vision accessibility features, she would be able to access e-mails with use of audible reading features (i.e. Voice Over) built into the iPad. If medical reports are accessible to the iPad, she may be able to listen to them using Voice Over. She would benefit from training to learn the low vision accessibility features of the iPad, if UH incorporates this technology for staff.

Ms. Moss reported that the new copiers at work have a flat touch screen. She would benefit from bump dots to assist her in orienting to the position of copier functions display.

Ms. Moss is required to sign treatment plans. OT assessed her for writing aids. A typoscope/signature guide was demonstrated and found to be helpful for writing her signature.

Ms. Moss is required to write out daily schedule on a white board as part of "Schedule Awareness." OT problem-solved with Ms. Moss regarding the use of contrast electrical tape to grid off white board fields for the daily schedule. She reports this method has been done and is effective.

Ms. Moss reported that, on occasion, she has bumped into staff when they are wearing dark clothing that poorly contrasted with dark flooring on the unit. She reported this as a mild concern. High contrast-light on dark- helps with improved viewing. Also, it was reported that she has walked into a patient room when being seen by nursing. Use of verbal cues from staff is acceptable etiquette in working with persons with low vision or blindness.

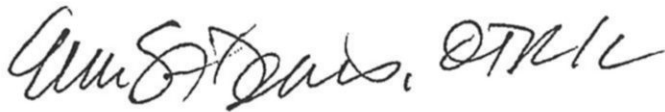
Ms. Moss is required to participate in crisis intervention and staff trainings. Having materials ahead of time for review and partnering with a staff member or trainer who is aware of need for verbal and touch prompts to motor Ms. Moss through any physical components may be beneficial.

It was reported that Ms. Moss has difficulty noticing when patients get up from their seats, need assistance (i.e. during Bingo) or reading patient's facial expressions. Ms. Moss reported she uses auditory compensatory strategies to listen for tone of voice or responsiveness when she initiates a question or interaction. She reports she will also ask other staff/nurses for feedback regarding patient behavior or affect. Otherwise, Ms. Moss is unable to see faces or expressions.

Low vision recommendations:

1. Topaz EZ HD with 24" monitor
2. Assistive technology evaluation for a scanner may be beneficial for reading printed reading materials (not hand written).
3. Work with UH's IT department re: Zoom Text accessibility with UH software
4. Training in low vision accessibility feature of iPad if/when iPads are introduced to be used by staff.
5. Marking of copier with bump dots for improved accessibility to flat display/touch screen for copier functions
6. Typoscope for signatures
7. Verbal prompts when passing in hall or to re-direct out of room if private session with a patient
8. Accessible materials for staff trainings and staff/trainer assistance to motor through any physical components to training
9. Additional optometrist recommendations: 10x LED hand held magnifier for spot reading, continuation of 8x DVI microscopic readers OD (right), +24 binocular AOLITE microscopic reading glasses.
10. Training of staff on Blindness Basics.

Report respectfully submitted by:



Erin St. Denis, OTR/L

Cleveland Sight Center

(216) 658-8783

**Farley, Karen**

---

**From:** Evans, Allison  
**Sent:** Friday, May 05, 2017 1:50 PM  
**To:** Kohlbacher, Georgene (gkohlba2)  
**Cc:** Farley, Karen; Fernandez, Laura; Reese, Jane (Litigation); Fulton-Royer, Jill  
**Subject:** RE: f/u Debbie Moss

Georgene-

My apologies for the delayed response. Yes, I was able to visit BCOA for a little while on Wednesday. I observed some group and 1:1 patient time. Again, I have not met with Deb to see her in the environment, but here are the observations I made.

It is a very dynamic environment that requires excellent situational awareness and attention to detail. All staff must be able to interpret the affect of multiple patients at once through facial expression and body language, be able to engage patients with various levels of arousal and react to emotional and physical distress. With limitations in these abilities, the safety and the quality of care for the patients is compromised. The group atmosphere adds to the complexity of this due to a higher level of activity and distraction in the room for both the employees and the patients, in addition to the fact that there can be as many as 10-12 people in the room at once. Employees must be able to respond to patients experiencing internal stimuli, those with communication and behavioral issues and patients that pose a safety risk due to fall or elopement risk.

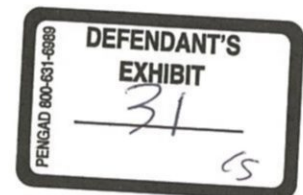
In addition, according to the job description for a recreation therapist, group activities should include community, exercise and recreational tasks. While some groups can be completed with patients seated together in a circle format, others will need to involve more movement and physicality from the patients and the group leader. With that there is more risk for falls and increased awareness necessary for tracking patient movements and interaction.

While technology accommodations can facilitate success with documentation and gathering information on patients, aside from limiting all interaction to 1:1, which could still pose a risk, there is little that can be done to accommodate for the variability of a psychiatric patient population for someone with such significant vision deficits.

Please let me know if I can be of further assistance.

Allison

Allison Evans, MHA, OTR/L, CLT  
Rehab Supervisor - Inpatient Programming  
University Hospitals Parma Medical Center  
7007 Powers Boulevard  
Parma, Ohio 44124  
(o) 440-743-4127  
(f) 440-743-4036  
[Allison.Evans@UH Hospitals.org](mailto:Allison.Evans@UH Hospitals.org)



**CONFIDENTIAL**

**From:** Kohlbacher, Georgene (gkohlba2)  
**Sent:** Thursday, May 04, 2017 2:56 PM  
**To:** Evans, Allison



05/23/2017 TUE 11:38 FAX 216 445 2226 H4697

001/001

*dabmoss@aol.com*

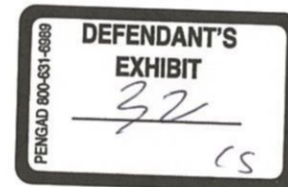


Elias I Traboulsi, MD  
Ophthalmology  
2022 East 106th St  
Cleveland OH 44106  
Dept: 216-444-2030

May 23, 2017

Georgene Kohlbacher, LISW-S, CEAP  
11100 Euclid Avenue, Mail Stop 6036  
Cleveland, Ohio 44106  
Fax: 216-983-3038

re: Deborah A. Moss  
CCF 17031449  
DOB: 05/31/1965



Dear Ms. Kohlbacher:

Pursuant to our conversation on May 22, 2017 about the ocular health status and contribution of Ms. Moss' poor vision to her function, I would like to provide this summary.

1. Indeed her condition is unable to improve and has led her to lose her central vision that provides the ability to see details and small targets from a distance and even from near. Her peripheral vision remains unaffected.
2. I am uncertain about the impact of her poor central vision on her ability to perform individual tasks because I have not observed her in her work and I am not in a good position to make comments about that aspect. I can certainly appreciate that from a distance that she would not be able to recognize faces or expressions on faces that would give queues to particular situations or feelings.

My hope is that Ms. Moss receives the appropriate training and is given a little bit more time and maybe instruction to see if she could meet the necessary requirements to perform this aspect of her work.

I hope these comments are helpful, and I thank you for asking for my opinion.

Sincerely,

  
Elias I. Traboulsi, M.D., M.Ed.

EIT/sw

cc: Karen Farley, CNP, MSN, Fax: 216-844-3990

From:

09/11/2017 04:41

#157 P.001/002

*ATTN: Emily White*



Sent regular USPS mail and certified mail

September 6, 2017

Ms. Deborah Moss  
63 Salem Court.  
Hinckley, OH 44233



**Re: Employment Status**

Dear Deborah:

As you know, you have been in a leave of absence status since February 2017 due to our concerns regarding your ability to safely perform the essential functions of your position as Rehabilitation Therapist, PMC Hanna Pavilion, due to your significant vision impairment. You currently remain in a leave status.

As you are aware, on February 14, 2017, you were referred to the UH Employee Assistance Program (EAP) for a mandatory fitness for duty due to safety concerns when you were unable to fully participate in de-escalation training which is essential when working with behavioral health/psychiatric patients. You were placed on paid administrative leave pending the fitness for duty evaluations.

Over the course of the past several months, we have met with you on several occasions as part of the interactive process to discuss and determine your ability to safely perform the essential functions of your position with or without reasonable accommodation. On June 1, 2017 your manager, your EAP counselor and I met with you. We specifically discussed that the behavioral health unit is a very dynamic environment that requires excellent situational awareness and attention to detail. Staff must have the ability to interpret the affect of multiple patients at once through facial expression and body language. You acknowledged the legitimacy of our safety concerns, the increase in patient acuity, increased severity of psychiatric issues, the change in patient demographics, increased code violets, and fewer staff to monitor patient activities and to deliver assistance during patient outbursts. All of these factors contribute to an increased risk to you, patients, and other staff members. We discussed the possibility of other positions in University Hospitals that would be a better fit with your visual deficiencies and encouraged you to investigate other opportunities and reach out to UH Pathways Career Coach, Faye Naftzger, who could also be of assistance.

On June 9, 2017, I informed you that based on our June 1, 2017 meeting and discussion, we were not able to identify any reasonable accommodation that would allow you to safely perform the essential functions of your job and return to your position at which time you had no suggestions for a reasonable accommodation. I also informed you that Administrative pay would cease but that you could utilize your paid time off/PTO (vacation pay). Most importantly, I informed you that your manager had initiated a Medical Leave of Absence (MLOA), and that you

*BH2*

From:

09/11/2017 04:42

#157 P.002/002

would be receiving medical certification paperwork from UH's Disability Management Services. An approved MLOA allows for employees to remain on role for up to 52 weeks.

On June 20, 2017, you called me with questions regarding the MLOA paperwork that you had received and I referred you to Kara Ladaika, Disability Management Services. I also reinforced that an approved MLOA allows for employees to remain on role for up to 52 weeks.

On August 7, 2017, I called you and you confirmed that you had not completed or returned the MLOA paperwork to Disability Management Services. You stated you didn't feel it would help you and that you had not applied for any other positions at UH. You also indicated that you intended to allow your PTO to run out. We discussed the need to bring closure to this matter.

At this juncture, the majority of your PTO will run out as of September 16, 2017 which will be paid out on September 21, 2017. Any remaining PTO will be paid out the following pay date. Your manager is initiating a Personal Leave for you until December 31, 2017. PTO will not accrue during this time, however, you may apply for as many open UH positions as you are qualified. If you are unable to secure another position, your employment will be terminated effective January 1, 2018.

I strongly encourage you to reach out to UH Pathways Career Coach, Faye Naftzger who can be reached at 216.767.8363. Also, I am available for any questions by contacting me at 440.743.4052.

Sincerely,



Deborah Sheldon  
HR Generalist  
University Hospitals Parma Medical Center

Cc: Kathryn Holley, Manager, PMC Hanna Pavilion

B4B



## \*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*

Opportunities for Ohioans with Disabilities

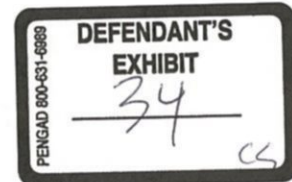
**Application**

Participant Moss, Deborah (Debra) A.  
 Caseload VI-AKR1-3 - Sullivan, Tim

Participant ID 109128

**1. Basic**

Application Date 01/05/2017  
 Primary Staff at Application Sullivan, Tim  
 Living Arrangement at Application Private residence  
 Voter Registration Outcome Currently registered  
 County at Application Medina  
 Zip Code at Application 44233



Marital Status Married  
 United States Citizen? Yes  
 If no, legal status to work in the Permanent Resident

**Referral Information**

Referral Date 01/03/2017  
 Referral Source Self-Referred Person  
 Referral Source Detail

**Organization Name**

Last Name  
 First Name  
 Middle  
 Honorific

**Address**

Address Line 2  
 Address Line 3  
 City

State OH Zip

Primary Phone	Voice	No	TDD	No	Fax	No
Second Phone	Voice	No	TDD	No	Fax	No
E-Mail Address						

**Comments**

Participant Report

Page 1 of 8

Printed 02/22/2017

## \*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*

## Opportunities for Ohioans with Disabilities

**Application**

Participant Moss, Deborah (Debra) A.  
 Caseload VI-AKR1-3 - Sullivan, Tim

Participant ID 109128

**2. Financial**Income and Household Information

Primary Source of Support Family and Friends

Public Support

Public Support Available	No
SSDI Status	Benefits Discontinued or Terminated
SSI Status	Applicant - Denied Benefits
Presumption of Eligibility Possible	No
Presumption of Eligibility Rationale	
Will Exhaust TANF Benefits Within 2 Years	
SSI Aged	\$0.00
SSI Blind	\$0.00
SSI Disabled	\$0.00
SSDI Disabled	\$0.00
VA	\$0.00
TANF	\$0.00
General Assistance	\$0.00
Worker's Compensation	\$0.00
Other Disability	\$0.00
Other	\$0.00

**3. Medical Insurance Information**Medical Insurance at Application

Private insurance through own employment

**4. Employment**

Date Last Employed

Participant is Requesting Services to Maintain Employment Yes

Employment within one week of Application

Work Status at Application Competitive Integrated Employment

Job Title Recreational Therapists (29112500)

Participant Report

Page 2 of 8

Printed 02/22/2017

## \*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*

## Opportunities for Ohioans with Disabilities

**Application**

Participant Moss, Deborah (Debra) A.

Participant ID 109128

Caseload VI-AKR1-3 - Sullivan, Tim

Hours Worked per Week 24

Salary \$599.28 Weekly

Hourly Wage \$24.97

Work History

Name Parma Community General Hospital

Address 7007 Powers Boulevard

Address Line 2

City Parma State OH Zip Code 44129-5495

Job Title Recreation Therapist

Job Duties Facilitating therapy groups for senior citizens w/ various mental health disorders. Develops program and monitors their activity and then case notes all encounters.

Current position and she wishes to remain working for this employer

Consumer is now working 30 hours per week (2/21/14) Aware adjusted

Hours Worked per Week 30

Salary \$828.00 Weekly

Hourly Wage \$27.60

Start Date 12/1996 End Date

**Reason for Leaving****Other Comments**

Has insurance benefits through her husband.

**Likes:**

enjoys helping people of all ages especially babies and elderly

**Dislikes:**

Not able to use computer system now as a result of the software changes. She can no longer use the computer independently.

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## Opportunities for Ohioans with Disabilities

## Application

Participant Moss, Deborah (Debra) A.

Participant ID 109128

Caseload VI-AKR1-3 - Sullivan, Tim

My disability makes completing some of my tasks difficult. Takes longer to complete my work tasks. I also cannot travel alone by myself now.

Name Deborah Moss

Address P.O. Box 181

Address Line 2

City Hinkley State OH Zip Code 44233

Job Title Baby Sitter

Job Duties Had to watch a 6th month old baby.

Was not permitted to leave the house while the parents are away.

Likes:

Got to play Mom for a baby - reported I love babies.

Dislikes:

The Family did not want her leaving their home - did not like being inside all day.

Did not feel her disability impacted her ability to care for a baby.

Hours Worked per Week 40

Salary \$120.00 Weekly

Hourly Wage \$3.00

Start Date 01/1995

End Date 01/1996

## Reason for Leaving

Left to take a job in her field

## Other Comments

Name BWC

Address 10524 Euclid Avenue

Address Line 2

City Cleveland State OH Zip Code 44195



## \*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*

## Opportunities for Ohioans with Disabilities

## Application

Participant Moss, Deborah (Debra) A.

Participant ID 109128

Caseload VI-AKR1-3 - Sullivan, Tim

Job Title Rec Therapist for injured workers

Job Duties Taught the injured workers activities they could use to help keep their recovery on track. Taught landbased and aquatic activities. Developed and implimented programs through BWC.

## Likes:

Could use their facility to stay in shape and gt paid for it at the same time.

## Dislikes:

She had to travel a long way to work and it was difficult and stressful

Had difficulty charting and reading paperwork and reviewing notes took a lot of time and as her vision continued to decline she had more difficulty.

Hours Worked per Week

40

Salary

\$440.00 Weekly

Hourly Wage

\$11.00

Start Date

01/1989

End Date

12/1994

## Reason for Leaving

Facility was closed and was privatized - everyone lost their jobs

## Other Comments

## 5. RSA-911 Programs

Veteran

No

Migrant or Seasonal Farmworker

1. Not a migrant or seasonal farmworker

Projects with Industry

No

## 6. Disabilities

Disability Documentation

Number 1

Primary Yes

Secondary No

Onset Date

Impairment

Visual Impairment Leading to Legal Blindness

Impairment Due To

Macular Degeneration

Specific Impairment

Losing Vision

Participant Report

Page 5 of 8

Printed 02/22/2017



**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Application**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Sullivan, Tim

**Participant ID** 109128

**ICD-9 Code**

**ICD-9 Description**

**Other Comments**

Vision is getting worse and her vision now requires bigger and darker (more contrast) than before. She is also no longer able to read the copier controls (will likely need bump dots installed).

Glare is an issue and she has to work in the Dark to minimize glare and reflection. Re[ports the CCTV and Computer monitor looks gritty to her.

**Last Updated**

**Disability Documentation**

**Number 2**      **Primary** No      **Secondary** Yes      **Onset Date** 01/2012

**Impairment**      Other physical impairments  
**Impairment Due To**      Physical Disorders/Not Elsewhere Classified  
**Specific Impairment**      Restless Leg Syndrome

**ICD-9 Code**

**ICD-9 Description**

**Other Comments**

Takes meds and it seems to help but her sleep is off - Tamazipam (was on Gabapentin). Can only sleep 4 hours at a time and then tosses and turns the rest of the night.

**Last Updated**

**Disability Documentation**

**Number 3**      **Primary** No      **Secondary** No      **Onset Date**

**Impairment**      Psychosocial impairments  
**Impairment Due To**      Anxiety Disorder  
**Specific Impairment**      Has issues w/ worry about being able to work

**ICD-9 Code**

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Application****Participant** Moss, Deborah (Debra) A.**Participant ID** 109128**Caseload** VI-AKR1-3 - Sullivan, Tim**ICD-9 Description****Other Comments**

Has anxiety with work and worry about getting her work done and then sometimes at home. Her Doctor knows but with her other meds does not want to take any more meds than required.

**Last Updated****7. Special Programs****Other Agencies and Services****Individuals, Agencies, and Other Entities Participant Has Been Referred To****Referred To****Referral Date****Other Service Providers and Funding Sources Providing Services or Funding to Participant****Involved With****Begin Date****End Date****Case Fund Eligibility****8. Documentation****What does the participant expect from VR to gain or maintain employment?**

Consumer reports needing assistance with her CCTV and Computer Access. Will also need help with marking the copy machines as well. The consumer has tried to obtain assistance with the purchase of another CCTV as the one she has is not working for her. She has worked with her employer but is frustrated as she has provided her EOR w/ info and it has been since August.

**Describe employment needs****Describe the next steps in establishing eligibility**

Will need to review prior case and as her disability is not one that will get better over time this information gained from the prior case is still valid. Additional medical information.

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Opportunities for Ohioans with Disabilities

**Application**

Participant Moss, Deborah (Debra) A.

Participant ID 109128

Caseload VI-AKR1-3 - Sullivan, Tim

Other participant information or comments.

---

**9. Employment Impediments**

---

Poor Work History

1. Does NOT have poor work history

Lack of Educational or Occupational Skills Attainment

1. Does NOT lack educational or occupational skills

Limited English Proficiency

1. Does NOT have limited English skills

Limited Literacy Skills

1. Does NOT have limited literacy skills

Cultural Barriers

1. Cultural barriers do NOT inhibit ability to work

Basic Skills Deficient

1. Is NOT basic skills deficient

Dislocation from High-Wage and High-Benefit Employment

1. NOT dislocated from high-wage/benefit employment

Single Parent

1. NOT a single parent

Displaced Homemaker

1. NOT a displaced homemaker

Low Income

1. NOT low income

Dislocated Worker

1. NOT a dislocated worker

Foster Care Youth

1. NOT ever been in foster care

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Opportunities for Ohioans with Disabilities

Case Notes

Participant Moss, Deborah (Debra) A.  
Caseload VI-AKR1-3 - Vacant, Akron  
BSVI 1

Participant ID 109128

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**1. General**

Entry Date 01/05/2017  
Author Sullivan, Tim  
Category Comprehensive Assessment  
Share Note Yes



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**2. Note**

Summary Complete  
Started 5/22

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**3. Activities Provided**

No items selected

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---

**1. General**

Entry Date 01/05/2017  
Author Sullivan, Tim  
Category Initial Interview  
Share Note Yes

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**2. Note**

Summary Pasted in from Word  
See Attachment

---

**3. Activities Provided**

No items selected

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---

**1. General**

Entry Date 01/05/2017  
Author Sullivan, Tim  
Category Medical Records

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Participant Report

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Printed 01/18/2019

Moss Production 000793



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Opportunities for Ohioans with Disabilities

Case Notes

Participant Moss, Deborah (Debra) A.  
Caseload VI-AKR1-3 - Vacant, Akron  
BSVI 1

Participant ID 109128

Share Note Yes

2. Note

Summary DR. M. FRANZ

3. Activities Provided

No items selected

1. General

Entry Date 01/05/2017  
Author Sullivan, Tim  
Category Medical Records  
Share Note Yes

2. Note

Summary NO MED ON FILE-COLE EYE/DR. TRADOLSI

3. Activities Provided

No items selected

1. General

Entry Date 01/05/2017  
Author Sullivan, Tim  
Category Medical Records  
Share Note Yes

2. Note

Summary FROM CSC - JAN'12 - CLVA

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 01/05/2017  
**Author** Sullivan, Tim  
**Category** Participant Acknowledgment  
**Share Note** No

**2. Note**

**Summary** Signed Participant Acknowledgment\_LP **Generated Letter** Yes  
 Signed PA Form is Attached

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 01/05/2017  
**Author** Sullivan, Tim  
**Category** Application for Services  
**Share Note** No

**2. Note**

**Summary** Signed App for VR Services\_AP\_LP **Generated Letter** Yes  
 See Attached App Form

**3. Activities Provided**

Contact with Consumer

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**1. General**

**Entry Date** 01/05/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Fact Sheet - App and Elig Ind Rights and Duties\_LP  
**Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 01/05/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Fact Sheet - App and Elig Ind Rights and Duties\_LP  
**Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 01/05/2017  
**Author** Sullivan, Tim  
**Category** Correspondence

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Share Note** No

**2. Note**

**Summary** Consent Form - Obtain & Release\_LP **Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 01/05/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Consent Form - Obtain & Release\_LP **Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 01/05/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Consent Form - Obtain & Release\_LP **Generated Letter** Yes

**3. Activities Provided**

Participant Report

Page 5 of 87

Printed 01/18/2019

Moss Production 000797



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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

No items selected

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**1. General**

---

**Entry Date** 01/27/2017  
**Author** Sullivan, Tim  
**Category** Release Form  
**Share Note** No

---

**2. Note**

---

**Summary** Signed Med Rel Deb Moss Dr. Traboulsi  
Signed Med Rel Form Attached -- Please Send Both Release Forms  
Deb Moss Signed CCF Cole Eye

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**3. Activities Provided**

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Contact with Consumer

---

**1. General**

---

**Entry Date** 01/27/2017  
**Author** Sullivan, Tim  
**Category** Release Form  
**Share Note** No

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**2. Note**

---

**Summary** Signed Med Rel Dr. Ormsby  
Signed Med Rel - Deb Moss Signed Med Rel Dr. Ormsby

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**3. Activities Provided**

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Contact with Consumer

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**1. General**

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Participant Report

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Opportunities for Ohioans with Disabilities

Case Notes

Participant Moss, Deborah (Debra) A.  
Caseload VI-AKR1-3 - Vacant, Akron  
BSVI 1

Participant ID 109128

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Entry Date 01/27/2017  
Author Sullivan, Tim  
Category Release Form  
Share Note No

**2. Note**

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Summary Deb Moss Signed Med Rel Dr. Bures  
Signed Med Rel - Deb Moss Signed Med Rel Dr. Bures

**3. Activities Provided**

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Contact with Consumer

---

**1. General**

---

Entry Date 01/27/2017  
Author Sullivan, Tim  
Category Release Form  
Share Note No

**2. Note**

---

Summary Deb Moss Signed Med Rel CCF Cole Eye  
See Signed Med Rel - Deb Moss Signed CCF Cole Eye

**3. Activities Provided**

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Contact with Consumer

---

**1. General**

---

Entry Date 01/31/2017  
Author Sullivan, Tim  
Category Phone Call  
Share Note No

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**2. Note**

**Summary** call to Confirm Appt on Thursday  
 TC to Consumer to confirm our appointment on Thursday - request a call back.

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 02/01/2017  
**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Records Request - Cole Eye Institute **Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/01/2017  
**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Records Request - Dr. Bures **Generated Letter** Yes

**3. Activities Provided**

Participant Report

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

No items selected

**1. General**

**Entry Date** 02/01/2017  
**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Records Request - Dr. Ormsby	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/01/2017  
**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Records Request - Dr. Traboulsi	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/02/2017  
**Author** Sullivan, Tim

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Category** Phone Call

**Share Note** No

## 2. Note

**Summary** TC to Consumers Work Number

TC to Consumer's Work Number to alert her she was being found eligible for services and that I would like to meet with her and draft her plan tomorrow as she had to work today (normally her day off). Left VM for her.

## 3. Activities Provided

Contact with Consumer

## 1. General

**Entry Date** 02/02/2017

**Author** Sullivan, Tim

**Category** Correspondence

**Share Note** No

## 2. Note

**Summary** Eligibility & OOS Letter\_LP

**Generated Letter** Yes

## 3. Activities Provided

No items selected

## 1. General

**Entry Date** 02/02/2017

**Author** Sullivan, Tim

**Category** Comprehensive Assessment

**Share Note** Yes



**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**2. Note**

**Summary** Draft In Word

Draft in Word and work underway to complete it.

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 02/02/2017

**Author** Sullivan, Tim

**Category** Phone Call

**Share Note** No

**2. Note**

**Summary** TC to Consumer

TC to Consumer confirming and discussing plan for her IPE Services. Will meet with her tomorrow to draft plan and get her started. Consumer shared she still has tomorrow off and 10:00 is the preferred time to meet. VRC will meet her at her residence tomorrow.

We discussed vendors again before I finalized the CA and she would like to use the same vendors as last time - Cleveland Sight Center, KDL, her Doctor's and has no interest in travelling to Akron.

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 02/03/2017

**Author** Sullivan, Tim

**Category** Comprehensive Assessment

**Share Note** Yes

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**2. Note**

**Summary** Final CA  
 See Attached

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 02/03/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Consent Rel - Signed Rel for Employer **Generated Letter** Yes

**3. Activities Provided**

No Items selected

**1. General**

**Entry Date** 02/03/2017  
**Author** Sullivan, Tim  
**Category** IPE - Signed  
**Share Note** No

**2. Note**

**Summary** Signed Orig IPE  
 See attached scan

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 02/15/2017  
**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Records Request - Cole Eye Second Request	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/15/2017  
**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Records Request - Dr. Bures Second Request	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/15/2017



**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Records Request - Dr. Ormsby Second Request **Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/15/2017  
**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Records Request - Dr. Traboulsi Second Request **Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/21/2017  
**Author** Sullivan, Tim  
**Category** Phone Call  
**Share Note** No

**2. Note**

**Summary** VM from Consumer

Participant Report

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

VM from consumer asking that I give her a call so she can up d me on the situations.

---

**3. Activities Provided**

Contact with Consumer

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---

**1. General**

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**Entry Date** 02/21/2017  
**Author** Finnerty, Mary Anne  
**Category** Medical Records  
**Share Note** Yes

---

**2. Note**

---

**Summary** Univ. Hosp. Record

From: RightFax E-mail Gateway [rfax@rscadfs.rscad.state.oh.us]  
Sent: 2/21/2017 12:51 PM  
To: OOD NE Medical Fax

A fax has arrived from remote ID 'University Hosptials'.

-----  
Account: 9857840

-----  
2/21/2017 12:47:58 PM Transmission Record  
Received from remote ID: University Hosptials  
Inbound user ID NE\_MEDICAL, routing code 9857840  
Result: (0/352;0/0) Success  
Page record: 1 - 6  
Elapsed time: 02:52 on channel 11

---

**3. Activities Provided**

No items selected

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---

**1. General**

---

**Entry Date** 02/22/2017

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Author** Sullivan, Tim  
**Category** Phone Call  
**Share Note** No

**2. Note**

**Summary** TC from consumer left VM

TC from Consumer sharing she has been placed on Mandatory Medical Leave - while they make sure she is able to perform her Job. She has been sent to her POR, and will be sent to her Eye Specialist soon. She reports that she is okay with all of this as it might be a way for her to get the items she needs documented. This all came about when University Hospitals absorbed Parma Hospital where she works.

She will keep VRC in the loop. She is to contact this VRC before going to her eye doctor. She has not seen an eye specialist since her last case with us. VRC explained I cannot provide funding after the fact.

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 02/22/2017  
**Author** Sullivan, Tim  
**Category** Initial Interview  
**Share Note** Yes

**2. Note**

**Summary** New Intake 2017 AWARE GEN  
 See Attached

**3. Activities Provided**

Contact with Consumer

## \*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*

## Opportunities for Ohioans with Disabilities

## Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**1. General**

**Entry Date** 02/22/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Forms - Referral to CRP	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/28/2017  
**Author** Flickinger, Danielle  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Records Request - Second Request	<b>Generated Letter</b>	Yes
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CA spoke to Pamela at the Cleveland Clinic Cole Eye Institute. Pamela states they never received a request for records from our agency. She then requested the record request be resent.

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 02/28/2017  
**Author** Flickinger, Danielle  
**Category** Case Note General



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

**Share Note** No

---

## 2. Note

**Summary** Record request follow up

CA spoke with Dr. Ormsby who stated he has received the request for records from our agency. Dr.Ormsby states he hopes to have a completed and faxed back to our agency by 3/3/17 CA provided fax number.

## 3. Activities Provided

No items selected

---

## 1. General

**Entry Date** 03/09/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

---

## 2. Note

**Summary** update

From: Debbie Moss [dabmoss@aol.com]  
Sent: 3/9/2017 11:08 AM  
To: Sullivan, Timothy

Hi Tim,

Well, apparently the new keyboard was delivered. I guess they have definitely turned over to UH system as my coworker just called asking questions as they are having trouble with the system. "woo hoo!!" I don't have to deal with that stress at this time. I am enjoying my "20 year sabbatical" Getting lots of things done.

My eye Dr. referred to low vision clinic at sight center and they are certainly all on wrong pages. I have an appointment that was made over 2 weeks ago and not until the 21st. Then we'll see what happens from there.

I'll keep you posted.

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Debbie

**3. Activities Provided**

No items selected

---

**1. General**

**Entry Date** 03/09/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

---

**2. Note**

**Summary** RE: update

From: Sullivan, Timothy  
Sent: 3/9/2017 11:14 AM  
To: 'Debbie Moss'

Good Morning,

Thank you for keeping me in the loop.

I kinda thought you would not sit around for long. Do you mean the new ZoomText Keyboard was delivered and they are having trouble with the ZoomText and the UH Computer System? Maybe we could help your employer get the kinks worked out? What do you think?

Let me know,

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Opportunities for Ohioans with Disabilities  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

Tim

---

### 3. Activities Provided

No items selected

---

#### 1. General

**Entry Date** 03/14/2017  
**Author** Finnerty, Mary Anne  
**Category** Medical Records  
**Share Note** Yes

---

#### 2. Note

**Summary** Dr. Ormsby/HealthSource, Records

From: RightFax E-mail Gateway [rfax@rscadfs.rscad.state.oh.us]  
Sent: 3/14/2017 3:43 PM  
To: OOD NE Medical Fax

A fax has arrived from remote ID '3302206115'.

-----  
3/13/2017 4:00:28 PM Transmission Record  
Received from remote ID: 3302206115  
Inbound user ID NE\_MEDICAL, routing code 9857840  
Result: (0/352;0/0) Successful Send  
Page record: 1 - 43  
Elapsed time: 50:31 on channel 1

---

### 3. Activities Provided

No items selected

---

#### 1. General

**Entry Date** 03/22/2017  
**Author** Withrow, Tara  
**Category** Report

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**Share Note** No

---

**2. Note**

---

**Summary** Moss RT Mar 1949152 03-20-17

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**3. Activities Provided**

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No items selected

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---

**1. General**

---

**Entry Date** 03/30/2017  
**Author** Withrow, Tara  
**Category** Report  
**Share Note** No

---

**2. Note**

---

**Summary** CSC - Low Vision Clinic Report

---

**3. Activities Provided**

---

No items selected

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---

**1. General**

---

**Entry Date** 04/03/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

---

**2. Note**

---

**Summary** update.

From: Debbie Moss [dabmoss@aol.com]  
Sent: 4/3/2017 12:02 PM.



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

To: Sullivan, Timothy; Sullivan, Timothy

Hi Tim,

I have 2 emails, not sure which is correct so I sent to both.

Anyway, "Time Marches On". So had low vision with Dr. on 22. Now apparently have to meet with OT at sight center on Wed. for "work assessment" based eval as a referral from original appointment. Also supposed to hear results of initial eval from UH wither later today or on Wed.

Also met with Bill and sounds like he wants me to upgrade to windows 10 as new zoomtext upgrade is also available at no cost. My speech isn't working when I write emails and hasn't for awhile and Zoomtext support hasn't been able to figure it out. Frustrating when not reading or screen not moving. So I apologize for any errors.

Debbie

### 3. Activities Provided

---

No items selected

---

### 1. General

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**Entry Date** 04/20/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** update

From: Debbie Moss [dabmoss@aol.com]  
Sent: 4/20/2017 8:38 AM  
To: Sullivan, Timothy; Sullivan, Timothy

Hi Tim,

Hope you are well. I seem to have just developed spring allergies, itchy eyes...

Anyhow, still no word on work. Thought I'd hear something by now but last contact was a week

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

ago Wed. when called to get verbal permission to talk to UH OT as they recommended a worksite eval (which is what I asked for as well for posturing...). Who knows. 2 months, it's going to be like starting a new job. They have been doing some reconstruction with fire sprinklers (yes, believe it or not they did not have sprinklers in parts of the floor which included my office.

My home computer is acting up this week. Had to reboot twice this morning and I keep getting a pop up for "advanced pc care" and it won't go away. Blocks my screen in certain areas where I can't read what was typed and of course, my reader hasn't been working for months. Bill just waiting to get go ahead from you to have computer serviced.

I'll keep you posted.

Debbie Moss

### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 04/20/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** RE: update

From: Sullivan, Timothy  
Sent: 4/20/2017 8:55 AM  
To: 'Debbie Moss'

Okay,

Thanks for the update...

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Me too – my allergies have not been like this in a couple of years... Today I am wheezing as well.... Ugh... yuck....

Okay will get KDL auth released – please take this time to practice so you don't lose the computer skills you have (I mean after the computer gets squared away.

Thank you again for the update.... If you hear anything at all let me know.

Tim

Akron BSVI Counselor for the Akron Office of BSVI.

**3. Activities Provided**

No items selected

---

**1. General**

**Entry Date** 04/24/2017  
**Author** Grair, Marcia  
**Category** Medical Records  
**Share Note** Yes

**2. Note**

**Summary** MOSS MED REC CLEVE CLINIC & IOD INVOICE  
4-24-17

**3. Activities Provided**

No items selected

---

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** , VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**1. General**

**Entry Date** 04/25/2017  
**Author** Withrow, Tara  
**Category** Correspondence  
**Share Note** No

**2. Note**

---

**Summary** D Moss - Dr. Traboulsi CCF - Response to Rec  
Req

**3. Activities Provided**

No items selected

---

**1. General**

---

**Entry Date** 05/02/2017  
**Author** Grair, Marcia  
**Category** Medical Records  
**Share Note** Yes

**2. Note**

---

**Summary** MOSS MED REC CLEV CLINIC CCF MAIN  
CAMPUS.

**3. Activities Provided**

No items selected

---

**1. General**

---

**Entry Date** 05/10/2017  
**Author** Sullivan, Tim



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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Category** E-Mail

**Share Note** No

**2. Note**

**Summary** update

From: Debbie Moss [dabmoss@aol.com]

Sent: 5/10/2017 12:01 PM

To: Sullivan, Timothy

Hi Tim,

Still no word on work. Spoke to EAP lady today and even she doesn't know what the hold up is. It all seems to be over my request to have posture eval at work station. That can be done when I get back. They're apparently saying something about an OT observing what I would be doing if I were there. Seems like people at Parma are just dragging their feet. Now eating vacation time and my life seems to be on hold regarding some plans.

Anyway, Bill just called and wants in writing that it is ok to have my computer serviced. He didn't want to bug you Monday as I guess you were in a meeting.

Thanks, Debbie

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 06/01/2017

**Author** Sullivan, Tim

**Category** E-Mail

**Share Note** No

**2. Note**

**Summary** update

From: Debbie Moss [dabmoss@aol.com]

Participant Report

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Sent: 6/1/2017 7:22 PM

To: Sullivan, Timothy; Sullivan, Timothy

Hi Tim,

Not sure if you got my phone message this afternoon but it is sounding like my options are;

1. resign
2. be terminated
3. return to work if they decide and "micro manage" me and then terminate if not working out.

They might check into other positions at the hospital totally unrelated to what I do, but could be option.

My parents are in town so if you can't reach me, you can try my husband's cell and he can get a hold of me. Running around.  
330-591-0766.

Thanks, Debbie

---

### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 06/02/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** RE: update  
From: Sullivan, Timothy  
Sent: 6/2/2017 8:52 AM  
To: 'Debbie Moss'

Good Morning,

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Hmmmm....

Who gave you these options? HR?

Do you have a time frame? We can always add some services to your vocational plan for Job Placement and Development. I know it is likely not what you wanted to do – but that is another option you also have.

I will try and call you this afternoon in between appointments.

Thank you for the update...

Hang in there....

Tim

Vocational Rehabilitation Counselor for the Akron Office of OOD.

**3. Activities Provided**

No items selected

---

**1. General**

---

**Entry Date** 06/02/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**2. Note**

**Summary** Re: update

From: Debbie Moss [dabmoss@aol.com]  
Sent: 6/2/2017 9:43 AM  
To: Sullivan, Timothy

Hi Tim,

Yes it was HR. I may be out and about this afternoon leaving sometime after noon and back by 3ish if I do go out. Hope we connect.

Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov>  
To: Debbie Moss <dabmoss@aol.com>  
Sent: Fri, Jun 2, 2017 8:52 am  
Subject: RE: update

Good Morning,

Hmmmm....

Who gave you these options? HR?

Do you have a time frame? We can always add some services to your vocational plan for Job Placement and Development. I know it is likely not what you wanted to do – but that is another



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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

option you also have.

I will try and call you this afternoon in between appointments.

Thank you for the update...

Hang in there....

Tim

Vocational Rehabilitation Counselor for the Akron Office of OOD.

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 06/08/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Referral to KDL	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Entry Date** 06/08/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Referral to ULVA **Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 06/10/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

**2. Note**

**Summary** work property

From: Debbie Moss [dabmoss@aol.com]

Sent: 6/10/2017 9:53 AM

To: Sullivan, Timothy; Sullivan, Timothy

Hi Tim,

Well a new chapter is beginning. I did want to verify before I go to pick up my personal belongings from work what is mine.

I know the closed circuit tv and zoomtext software and keyboards (particularly the one that was just ordered in Feb?)

Is the computer monitor mine too?

Hopefully we can talk Monday morning to discuss next steps.

Thanks again for all your help along the way.

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

Debbie

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 06/12/2017  
**Author** Sullivan, Tim  
**Category** Documentation  
**Share Note** No

**2. Note**

**Summary** Reviewed Purchases

Reviewed purchases per her last 2 cases and will call her to consult on what is happening now with her job - it appears from her e-mail she may have resigned. VRC will get details per a call I will make next.

She needs to bring home the following:  
CCTV, Monitor, and ZoomText Keyboard

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 06/12/2017  
**Author** Sullivan, Tim  
**Category** Phone Call  
**Share Note** No

**2. Note**

**Summary** TC to Debbie per her request

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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

TC to Debbie per her request in her e-mail from late on Friday. Her parents were leaving when I called and so she asked that I call her back in about 10-15 min.

She did say a lot had happened and she needed to discuss this with me.

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 06/12/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Blank Letter - Fill In Signature_LP	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 06/12/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

**2. Note**

**Summary** Here are the items we discussed this am  
 From: Sullivan, Timothy  
 Sent: 6/12/2017 6:25 PM  
 To: Debbie Moss (dabmoss@aol.com)

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Good Evening,

Here are the Job Placement and Development Vendors and the loan lease info for you.

Okay – I could only go back so far as the prior cases have been destroyed. You will need to check on the Serial number for the ZoomText Upgrade. If you have a large Monitor at home your employer may have provided the other one.

Thanks Tim – questions call me --- Thanks

**3. Activities Provided**

No items selected

---

**1. General**

---

**Entry Date** 06/26/2017  
**Author** Grair, Marcia  
**Category** Report  
**Share Note** No

**2. Note**

---

**Summary** MOSS EQUIP JUN 2012401 6-26-17

**3. Activities Provided**

No items selected

---

**1. General**

---

**Entry Date** 06/29/2017



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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** Forms - Loan/Lease Agreement **Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 06/29/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

**2. Note****Summary** Question

From: Sullivan, Timothy  
 Sent: 6/29/2017 9:21 AM  
 To: Bill Merholz (wmerholz@gmail.com)

Good Morning Bill,

Did you get the keyboard and software for Deb M? Please let me know so I can process her billing to ULVA.

Thanks and have a great day...

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**Opportunities for Ohioans with Disabilities**

**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

**3. Activities Provided**

No items selected

---

**1. General**

---

**Entry Date** 06/29/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

**2. Note**

---

**Summary** Re: Question

From: wmerholz@gmail.com [wmerholz@gmail.com]  
Sent: 6/29/2017 11:45 AM  
To: Sullivan, Timothy

Yes...have a great day.

From: Timothy.Sullivan@ood.ohio.gov <mailto:Timothy.Sullivan@ood.ohio.gov>  
Sent: Thursday, June 29, 2017 9:21 AM  
To: mailto:wmerholz@gmail.com  
Subject: Question

Good Morning Bill,

Did you get the keyboard and software for Deb M? Please let me know so I can process her billing to ULVA.

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

< [https://na01.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.avg.com%2Femail-signature%3Futm\\_medium%3Demail%26utm\\_source%3Dlink%26utm\\_campaign%3Dsig-email%26utm\\_content%3Demailclient&data=02%7C01%7CTimothy.Sullivan%40ood.ohio.gov%7Ce0c1c8877424404153d708d4bf05e89e%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C636343479470329626&sdata=4FYFIOI1ul5DCI%2FmI55%2BC8TccDsCOWHsJadv6ac8FM%3D&reserved=0](https://na01.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.avg.com%2Femail-signature%3Futm_medium%3Demail%26utm_source%3Dlink%26utm_campaign%3Dsig-email%26utm_content%3Demailclient&data=02%7C01%7CTimothy.Sullivan%40ood.ohio.gov%7Ce0c1c8877424404153d708d4bf05e89e%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C636343479470329626&sdata=4FYFIOI1ul5DCI%2FmI55%2BC8TccDsCOWHsJadv6ac8FM%3D&reserved=0) > Virus-free. www.avg.com <  
[https://na01.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.avg.com%2Femail-signature%3Futm\\_medium%3Demail%26utm\\_source%3Dlink%26utm\\_campaign%3Dsig-email%26utm\\_content%3Demailclient&data=02%7C01%7CTimothy.Sullivan%40ood.ohio.gov%7Ce0c1c8877424404153d708d4bf05e89e%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C636343479470329626&sdata=4FYFIOI1ul5DCI%2FmI55%2BC8TccDsCOWHsJadv6ac8FM%3D&reserved=0](https://na01.safelinks.protection.outlook.com/?url=http%3A%2F%2Fwww.avg.com%2Femail-signature%3Futm_medium%3Demail%26utm_source%3Dlink%26utm_campaign%3Dsig-email%26utm_content%3Demailclient&data=02%7C01%7CTimothy.Sullivan%40ood.ohio.gov%7Ce0c1c8877424404153d708d4bf05e89e%7C50f8fcc494d84f0784eb36ed57c7c8a2%7C0%7C0%7C636343479470329626&sdata=4FYFIOI1ul5DCI%2FmI55%2BC8TccDsCOWHsJadv6ac8FM%3D&reserved=0) >

### 3. Activities Provided

No items selected

### 1. General

**Entry Date** 06/29/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

Participant Report

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Moss Production 000829



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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**Summary** Serial Number Needed

From: Sullivan, Timothy  
Sent: 6/29/2017 12:28 PM  
To: 'lindam@ulva.com'

Good Afternoon,

I need the serial number for the IRIS Software provided to Deb M...

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### **3. Activities Provided**

No items selected

---

### **1. General**

---

**Entry Date** 07/11/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### **2. Note**

---

**Summary** DM Auth#: 2012391

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

From: wmerholz@gmail.com [wmerholz@gmail.com]  
Sent: 7/11/2017 3:38 PM  
To: Sullivan, Timothy

Tim,

Is it possible to extend this authorization through today 7/11?

Thanks,  
Bill

### 3. Activities Provided

---

No items selected

---

### 1. General

---

**Entry Date** 07/11/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** RE: DM Auth#: 2012391

From: Sullivan, Timothy  
Sent: 7/11/2017 4:56 PM  
To: 'wmerholz@gmail.com'

Bill,

I have made the request and asked you be sent an Amended Authorization.

Thanks and have a great day...

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 07/11/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** Re: DM Auth#: 2012391  
From: wmerholz@gmail.com [wmerholz@gmail.com]  
Sent: 7/11/2017 5:38 PM  
To: Sullivan, Timothy

Thank you.

Sent from my iPhone

On Jul 11, 2017, at 4:56 PM, "Timothy.Sullivan@ood.ohio.gov <  
mailto:Timothy.Sullivan@ood.ohio.gov>" <Timothy.Sullivan@ood.ohio.gov <  
mailto:Timothy.Sullivan@ood.ohio.gov> > wrote:

Bill,

I have made the request and asked you be sent an Amended Authorization.

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 07/12/2017  
**Author** Pruchniewicz, Allison  
**Category** Report  
**Share Note** No

**2. Note**

**Summary** Moss RT July 2012391 07-12-17

-----Original Message-----

From: Akron5.Scan@OOD.ohio.gov [mailto:Akron5.Scan@OOD.ohio.gov]  
Sent: Wednesday, July 12, 2017 11:51 AM  
To: OOD NE Invoicing Fax  
Subject: Moss RT July 2012391 07-12-17

FROM=  
TO=  
DATE=07/12/2017  
TIME=10:50:02  
TIMEZONE=-05:00  
FCODE=

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**3. Activities Provided**

No items selected

---

**1. General**

**Entry Date** 07/16/2017  
**Author** Sullivan, Tim  
**Category** Documentation  
**Share Note** No

**2. Note**

**Summary** Job Description  
See Attached - Parma Gen prior position and accommodation form

---

**3. Activities Provided**

Contact with Consumer

---

**1. General**

**Entry Date** 07/18/2017  
**Author** Race, Rebecca  
**Category** Case Note General  
**Share Note** No

**2. Note**

**Summary** Loan Agreement/Release Statement

---

**3. Activities Provided**

No items selected

---

**1. General**

---



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**Entry Date** 08/03/2017

**Author** Sullivan, Tim

**Category** E-Mail

**Share Note** No

---

**2. Note**

---

**Summary** E\_M Vendor Placements

See Attached - highlighted in green recommendations.

2nd time...

Also Sent Job Description and forwarded prior e-mail with the Vendors.

---

**3. Activities Provided**

Contact with Consumer

---

---

**1. General**

---

**Entry Date** 08/03/2017

**Author** Sullivan, Tim

**Category** E-Mail

**Share Note** No

---

**2. Note**

---

**Summary** FW: Here are the items we discussed this am

From: Sullivan, Timothy

Sent: 8/3/2017 11:30 AM

To: Debbie Moss (dabmoss@aol.com)

Good Morning,

Here you go the e-mail I sent you before. I will send the next e-mail with the job description attached.

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Let me know who you would like to use for help with finding work – once I know which one you want to use I can add that to your plan.

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

From: Sullivan, Timothy  
Sent: Monday, June 12, 2017 6:26 PM  
To: Debbie Moss (dabmoss@aol.com) <dabmoss@aol.com>  
Subject: Here are the items we discussed this am

Good Evening,

Here are the Job Placement and Development Vendors and the loan lease info for you.

Okay – I could only go back so far as the prior cases have been destroyed. You will need to check on the Serial number for the ZoomText Upgrade. If you have a large Monitor at home your employer may have provided the other one.

Thanks Tim – questions call me --- Thanks

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**3. Activities Provided**

No items selected

---

**1. General**

---

**Entry Date** 08/03/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

**2. Note**

---

**Summary** Job Description  
From: Sullivan, Timothy  
Sent: 8/3/2017 11:34 AM  
To: Debbie Moss (dabmoss@aol.com)

Good Morning again,

Here is the Job Description...

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089



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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**3. Activities Provided**

No items selected

---

**1. General**

---

**Entry Date** 08/03/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

**2. Note**

---

**Summary** Re: Job Description  
From: Debbie Moss [dabmoss@aol.com]  
Sent: 8/3/2017 12:28 PM  
To: Sullivan, Timothy

Thanks!!!

I will be calling the 2 vendors this afternoon. Don't know how I missed these attachments.

Thanks again,  
Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov>  
To: Debbie Moss (dabmoss@aol.com) <dabmoss@aol.com>  
Sent: Thu, Aug 3, 2017 11:35 am  
Subject: Job Description

Good Morning again,

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Here is the Job Description...

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 08/11/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** Re: Here are the items we discussed this am

From: Debbie Moss [dabmoss@aol.com]

Sent: 8/11/2017 6:35 PM

To: Sullivan, Timothy

Hi Tim,

Both voc. specialists returned my calls this week. They both seem very good.  
Do you have a preference of either Kimberly (voc. works) or Lisa with voc. resources? Have you had better luck with either? Let me know your thoughts.

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Thanks,  
Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov>  
To: Debbie Moss (dabmoss@aol.com) <dabmoss@aol.com>  
Sent: Thu, Aug 3, 2017 11:30 am  
Subject: FW: Here are the items we discussed this am

Good Morning,

Here you go the e-mail I sent you before. I will send the next e-mail with the job description attached.

Let me know who you would like to use for help with finding work – once I know which one you want to use I can add that to your plan.

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

From: Sullivan, Timothy  
Sent: Monday, June 12, 2017 6:26 PM  
To: Debbie Moss (dabmoss@aol.com <mailto:dabmoss@aol.com> ) <dabmoss@aol.com <mailto:dabmoss@aol.com> >  
Subject: Here are the items we discussed this am

Good Evening,

Here are the Job Placement and Development Vendors and the loan lease info for you.

Okay – I could only go back so far as the prior cases have been destroyed. You will need to check on the Serial number for the ZoomText Upgrade. If you have a large Monitor at home your employer may have provided the other one.

Thanks Tim – questions call me --- Thanks

### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 08/14/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** RE: Here are the items we discussed this am

From: Sullivan, Timothy  
Sent: 8/14/2017 9:20 AM

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

To: 'Debbie Moss'

Good Morning,

Both are very good Voc Works (Kimberley) has a background working with Injured Workers and in my opinion works a little faster. They have helped place more for me this year.

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 08/15/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** Job Placement

From: Sullivan, Timothy  
Sent: 8/15/2017 10:06 AM  
To: 'Debbie Moss'

Good Morning,

---

Participant Report

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Okay will work on the paperwork and we may need to meet are our free tomorrow?

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 08/15/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** Re: Job Placement  
From: Debbie Moss [dabmoss@aol.com]  
Sent: 8/15/2017 8:56 PM  
To: Sullivan, Timothy

Hi Tim,

After checking out Ohio Means Jobs, looks like it is used as part of package with voc job searching.

Wed. before 11:30 is good or Thurs//fri. before noon.

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov>  
To: Debbie Moss <dabmoss@aol.com>  
Sent: Tue, Aug 15, 2017 10:07 am  
Subject: Job Placement

Good Morning,

Okay will work on the paperwork and we may need to meet are our free tomorrow?

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### **3. Activities Provided**

No items selected

---

### **1. General**

**Entry Date** 08/22/2017

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**Author** Sullivan, Tim

**Category** E-Mail

**Share Note** No

## 2. Note

---

**Summary** Re: Here are the items we discussed this am

From: Debbie Moss [dabmoss@aol.com]

Sent: 8/22/2017 11:58 AM

To: Sullivan, Timothy

Hi Tim,

I guess when you work with voc specialist, they have you sign up with Ohiomeans jobs. It is also mandated with unemployment.

It would probably still be best to work with Kimberly. This week I am free on Wed. and Friday all day, Thursday before 11:30 or possibly after 3.

Thanks,  
Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov>

To: Debbie Moss <dabmoss@aol.com>

Sent: Mon, Aug 14, 2017 9:20 am

Subject: RE: Here are the items we discussed this am

Good Morning,

Both are very good Voc Works (Kimberley) has a background working with Injured Workers and in my opinion works a little faster. They have helped place more for me this year.



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 08/22/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** RE: Here are the items we discussed this am

From: Sullivan, Timothy  
Sent: 8/22/2017 1:18 PM  
To: 'Debbie Moss'

Good Afternoon,

That is correct... it is one of the things our agency has made mandatory. Would Friday Sept 1st work for you?

Thanks and have a great day...

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

From: Debbie Moss [mailto:dabmoss@aol.com]  
Sent: Tuesday, August 22, 2017 11:58 AM  
To: Sullivan, Timothy <Timothy.Sullivan@ood.ohio.gov>  
Subject: Re: Here are the items we discussed this am

Hi Tim,

I guess when you work with voc specialist, they have you sign up with Ohiomeans jobs. It is also mandated with unemployment.  
It would probably still be best to work with Kimberly. This week I am free on Wed. and Friday all day, Thursday before 11:30 or possibly after 3.

Thanks,  
Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov <  
mailto:Timothy.Sullivan@ood.ohio.gov> >  
To: Debbie Moss <dabmoss@aol.com <mailto:dabmoss@aol.com> >  
Sent: Mon, Aug 14, 2017 9:20 am  
Subject: RE: Here are the items we discussed this am

Good Morning,

Both are very good Voc Works (Kimberley) has a background working with Injured Workers and in

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

my opinion works a little faster. They have helped place more for me this year.

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### 3. Activities Provided

---

No items selected

---

### 1. General

---

**Entry Date** 08/22/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** Re: Here are the items we discussed this am

From: Debbie Moss [dabmoss@aol.com]

Sent: 8/22/2017 3:03 PM

To: Sullivan, Timothy

Sure. I just have piano tuner coming at noon.

Debbie

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov>  
To: Debbie Moss <dabmoss@aol.com>  
Sent: Tue, Aug 22, 2017 1:31 pm  
Subject: RE: Here are the items we discussed this am

Good Afternoon,

That is correct... it is one of the things our agency has made mandatory. Would Friday Sept 1st work for you?

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

From: Debbie Moss [mailto:dabmoss@aol.com <mailto:dabmoss@aol.com?> ]  
Sent: Tuesday, August 22, 2017 11:58 AM  
To: Sullivan, Timothy <Timothy.Sullivan@ood.ohio.gov <mailto:Timothy.Sullivan@ood.ohio.gov>  
>  
Subject: Re: Here are the items we discussed this am

Hi Tim,

I guess when you work with voc specialist, they have you sign up with Ohiomeans jobs. It is also mandated with unemployment.

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

It would probably still be best to work with Kimberly. This week I am free on Wed. and Friday all day, Thursday before 11:30 or possibly after 3.

Thanks,  
Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov <  
mailto:Timothy.Sullivan@ood.ohio.gov> >  
To: Debbie Moss <dabmoss@aol.com <mailto:dabmoss@aol.com> >  
Sent: Mon, Aug 14, 2017 9:20 am  
Subject: RE: Here are the items we discussed this am

Good Morning,

Both are very good Voc Works (Kimberley) has a background working with Injured Workers and in my opinion works a little faster. They have helped place more for me this year.

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

### 3. Activities Provided

---

No items selected

---

### 1. General

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**Entry Date** 08/22/2017

Participant Report

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Moss Production 000850



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

**2. Note**

---

**Summary** Re: Time

From: Debbie Moss [dabmoss@aol.com]  
Sent: 8/22/2017 3:28 PM  
To: Sullivan, Timothy

Sounds good. See you then.

Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov>  
To: Debbie Moss <dabmoss@aol.com>  
Sent: Tue, Aug 22, 2017 3:25 pm  
Subject: Time

Hello Again,

Will 10:00 work for you?

Thanks and have a great day...

Tim

---

Participant Report

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Moss Production 000851

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**Opportunities for Ohioans with Disabilities**

**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Vocational Counselor for the Akron Office of OOD

330/641-4089

From: Debbie Moss [mailto:dabmoss@aol.com <mailto:dabmoss@aol.com?> ]  
Sent: Tuesday, August 22, 2017 3:03 PM  
To: Sullivan, Timothy <Timothy.Sullivan@ood.ohio.gov <mailto:Timothy.Sullivan@ood.ohio.gov>  
>  
Subject: Re: Here are the items we discussed this am

Sure. I just have piano tuner coming at noon.

Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov <  
mailto:Timothy.Sullivan@ood.ohio.gov> >  
To: Debbie Moss <dabmoss@aol.com <mailto:dabmoss@aol.com> >  
Sent: Tue, Aug 22, 2017 1:31 pm  
Subject: RE: Here are the items we discussed this am

Good Afternoon,

That is correct... it is one of the things our agency has made mandatory. Would Friday Sept 1st work for you?

Thanks and have a great day...

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

From: Debbie Moss [mailto:dabmoss@aol.com <mailto:dabmoss@aol.com?> ]  
Sent: Tuesday, August 22, 2017 11:58 AM  
To: Sullivan, Timothy <Timothy.Sullivan@ood.ohio.gov <mailto:Timothy.Sullivan@ood.ohio.gov>  
>  
Subject: Re: Here are the items we discussed this am

Hi Tim,

I guess when you work with voc specialist, they have you sign up with Ohiomeans jobs. It is also mandated with unemployment.  
It would probably still be best to work with Kimberly. This week I am free on Wed. and Friday all day, Thursday before 11:30 or possibly after 3.

Thanks,  
Debbie

-----Original Message-----

From: Timothy.Sullivan <Timothy.Sullivan@ood.ohio.gov <mailto:Timothy.Sullivan@ood.ohio.gov> >  
To: Debbie Moss <dabmoss@aol.com <mailto:dabmoss@aol.com> >  
Sent: Mon, Aug 14, 2017 9:20 am  
Subject: RE: Here are the items we discussed this am

Good Morning,

Both are very good Voc Works (Kimberley) has a background working with Injured Workers and in



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

my opinion works a little faster. They have helped place more for me this year.

Thanks and have a great day...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

**3. Activities Provided**

---

No items selected

---

**1. General**

---

**Entry Date** 09/06/2017  
**Author** Sullivan, Tim  
**Category** IPE - Signed  
**Share Note** No

**2. Note**

---

**Summary** Signed IPE 2  
See Attached

**3. Activities Provided**

---

Contact with Consumer

---

**1. General**

---

**Entry Date** 09/13/2017  
**Author** Sullivan, Tim

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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Category** Correspondence

**Share Note** No

**2. Note**

**Summary** Referral to VocWorks

**Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 09/29/2017

**Author** Sullivan, Tim

**Category** E-Mail

**Share Note** No

**2. Note**

**Summary** follow up

From: Debbie Moss [dabmoss@aol.com]

Sent: 9/29/2017 4:13 PM

To: Sullivan, Timothy

Hi Tim,

Just wondering what you found out about voc. specialist and Ohio means jobs.

Thanks,  
 Debbie

**3. Activities Provided**

No items selected

**1. General**

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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Entry Date** 10/10/2017

**Author** Flickinger, Danielle

**Category** E-Mail

**Share Note** No

**2. Note**

**Summary** Email to JD

Good morning Amy,  
 I hope you had a very nice weekend. I am currently trying to set up the Job Placement and Development Meetings for Tim this month do you and Deb Moss have a meeting set up for either the week of the 23rd or the week of the 31st that he may be able to attend. If so could you please send me the date and time as well is a meeting place so I may place it on his calendar. Just letting you know he has an all-day meeting on 24 October and will be unavailable for any meetings that day. Thank you in advance for your cooperation with my request. I look forward to seeing you soon.  
 Best,

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 10/12/2017

**Author** Sullivan, Tim

**Category** Phone Call

**Share Note** No

**2. Note**

**Summary** TC to Deb

VRC called the consumer regarding the job fair and explained to her that we are in the process of sending out packets and that she was on the list for the Job Fair already.

Her first meeting w/ the Job D went well - she reported she just has a lot of things to get done, between that meeting an getting Jobs and Family Services paperwork (Unemployment). She will be on vacation starting Saturday for a week.

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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

VRC asked about her Technology and she shared she is having a little bit of difficulty and will be calling ZoomText to get assistance. VRC shared if she is having difficulty after talking with them to call me and I would see what I could do - maybe send out KDL to make sure her system is working correctly.

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 10/26/2017  
**Author** Flickinger, Danielle  
**Category** E-Mail  
**Share Note** No

**2. Note**

**Summary** Email packet for job fair

Good afternoon Deborah,  
 I hope you're having a nice day. I have attached the information for the Cleveland Job Fair on November 2. If you have any questions do not hesitate to contact me.  
 Best,

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 10/30/2017  
**Author** Flickinger, Danielle  
**Category** Case Note General  
**Share Note** No

**2. Note**

Participant Report

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Moss Production 000857



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**Summary** Phone call with Debra/job fair

CA spoke to Deborah who stated she is planning on attending the job fair on November 2 from 12 to 2:30 PM at the Holiday Inn. CA went over appropriate dress as well as to bring copies of her resume. Debra stated she understood Debra then asked CA about the showcase beginning at 11:30 AM. CA did her best to answer questions with the information provided in the letter.

---

**3. Activities Provided**

No items selected

---

---

**1. General**

**Entry Date** 10/30/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

---

**2. Note**

**Summary** E-Mail From Consumer

From: Debbie Moss [mailto:dabmoss@aol.com]  
Sent: Monday, October 30, 2017 1:57 PM  
To: Sullivan, Timothy <Timothy.Sullivan@ood.ohio.gov>  
Subject: job fair

Hi Tim,

I didn't know if I might catch a ride to job fair with you on Thursday. I'm having a hard time finding a ride.

Debbie

---

**3. Activities Provided**

Contact with Consumer

---

---

**1. General**

---

Participant Report

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Moss Production 000858

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Entry Date** 10/30/2017

**Author** Sullivan, Tim

**Category** Phone Call

**Share Note** No

## 2. Note

**Summary** TC to Debbie

Shared she may have a ride w/ an Uncle she will know tomorrow... She will call me in the am if she does not.

## 3. Activities Provided

Contact with Consumer

## 1. General

**Entry Date** 11/01/2017

**Author** Flickinger, Danielle

**Category** E-Mail

**Share Note** No

## 2. Note

**Summary** Email with JD

Good morning Amy,  
 I enjoyed talking with you this morning. Could I please have the date and time of your next Job development meeting with Deb Moss so that I may attend by phone this meeting if it works in our schedules.  
 Thanks,

CA also spoke with JD this morning and laid the groundwork for attending the meeting by phone.

## 3. Activities Provided

No items selected

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**1. General**

**Entry Date** 11/13/2017  
**Author** Flickinger, Danielle  
**Category** Case Note General  
**Share Note** No

**2. Note**

**Summary** Phone calls/meeting with JD

CA met with Deb Moss and her Job Developer Amy Rumrill. Amy and Deb stated they are through most of tier 1 and a registered with OMJ. Deb stated she registered with OMJ back in August and frequently follows up on job leads provided from them. Debra also attended the job fair in Cleveland and followed up with several nursing homes including Dan Barry and Evergreen for Activity Director Positions she also has a contact Sam at Silver Meadows Rehab that both Amy and Deb have followed up with. Amy and Deb stated since they've been meeting once a week they have filled out 4 to 5 job applications. Deb stated prior to that she was filling out to job applications a week. Amy then stated transportation may become an issue has Deb past to stay within the county Amy stated this may require a little creative thinking on her part. Amy also stated that may be overqualified for activity Dir. positions which may be why she is not receiving calls back. Debra also told CA she is utilizing a LinkedIn profile but is not sure how to use the profile to the fullest potential. CA ask if JD could help with this how also pose the same question to the VRC. Deb states she utilizes a job log in her notebook to keep track of the position she's applied for, and follows up with either a phone call or an email within 3 to 4 days of submitting an application. Deb states she may need her VRC to help her figure out transportation in the future. Amy stated Deb is very prompt and efficient with keeping appointments and schedules their appointments in a timely fashion. CA asked for Devon Amy within the next two business days to send an email confirmation of registration with OMJ.

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 11/14/2017  
**Author** Flickinger, Danielle  
**Category** E-Mail  
**Share Note** No



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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**2. Note**

**Summary** Email OMJ registration

Hello below is Deb Moss' ohioMeansJobs registration verification. Thanks.

Amy Rumrill, M.Ed., CRC  
Vocational Specialist  
330-472-9149 Phone  
1-855-643-0423 Fax

-----Original Message-----

From: Debbie Moss [mailto:dabmoss@aol.com]  
Sent: Monday, November 13, 2017 8:02 PM  
To: Rumrill, Amy  
Subject: Fwd: Welcome to OhioMeansJobs!

Debbie Moss

-----Original Message-----

From: omjseekerhelp <omjseekerhelp@monster.com>  
To: dabmoss <dabmoss@aol.com>  
Sent: Tue, Aug 15, 2017 05:46 PM  
Subject: Welcome to OhioMeansJobs!

Welcome to OhioMeansJobs

Hi Deborah,

Welcome to OhioMeansJobs.com! We've partnered with Monster.com to help you find the right job and get your career on track. You can log into your account with either your username or your email address.

The job you want is out there.

Get closer to it with these tips.

Post your resume - double your chances of finding a job Hear about positions directly from employers and double your chances of landing a job.

Write a compelling resume headline

When you post your resume, it's important for it to have an attention-grabbing headline. This is



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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

---

what employers will see when your resume appears in their searches. To write a compelling resume headline, include your desired job title and also other keywords that employers may search for.

Click the button below to post your resume, set your career goals and access job search tools to help you find your next job.

**GET STARTED**

Best of luck in your job search,

The OhioMeansJobs - Monster Team

Questions? Please do not reply to this email, contact us here.

To read the OhioMeansJobs.com Terms of Use, visit

<https://jobseeker.ohiomeansjobs.monster.com/UsageTerms.aspx>

To read the Monster Privacy Commitment, visit <http://inside.monster.com/privacy/home.aspx>.

If you have any doubt about the authenticity of this email, simply open a new web browser, type in <http://jobseeker.ohiomeansjobs.monster.com/>,

log in to your account safely and securely and then perform the requested activity.

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---

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### **3. Activities Provided**

No items selected

---

### **1. General**

---

**Entry Date** 11/24/2017  
**Author** Bradley, Kimberly S.  
**Category** Report  
**Share Note** No

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**Opportunities for Ohioans with Disabilities**  
**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**2. Note**

**Summary** Moss INTAKE Oct 2070496 11-22-17

---

**3. Activities Provided**

No items selected

---

**1. General**

**Entry Date** 11/29/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

---

**2. Note**

**Summary** DM

From: Rumrill, Amy [Amy.Rumrill@VocWorks.com]  
Sent: 11/29/2017 6:28 AM  
To: Sullivan, Timothy

This message was sent securely using ZixCorp. < <http://www.zixcorp.com/get-started/>>

Hello Tim, could I call you today sometime about Deb Moss? Thanks.

Amy Rumrill, M.Ed., CRC

Vocational Specialist

330-472-9149 Phone

1-855-643-0423 Fax

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Opportunities for Ohioans with Disabilities  
Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

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### 3. Activities Provided

No items selected

---

### 1. General

---

**Entry Date** 12/04/2017  
**Author** Flickinger, Danielle  
**Category** E-Mail  
**Share Note** No

### 2. Note

---

**Summary** Email with JD

Good afternoon Amy,  
I hope you had a very nice weekend. I'm covering the job placement and development meetings for Tim for December. I was wondering when your next meeting with Deborah Moss is so that I may attended by phone. Please let me know as soon as possible so I can place it on my calendar. Please provide a phone number where you can be reached for the meeting.  
Best,

### 3. Activities Provided

No items selected

---



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

**1. General**

**Entry Date** 12/05/2017  
**Author** Flickinger, Danielle  
**Category** E-Mail  
**Share Note** No

---

**2. Note**

**Summary** Email from JD

Danielle, my next meeting with Deb Moss is on Tues 12/5 at 12:30 p.m. If you would like to call in, my number is 330-472-9149. I spoke with Tim about this case on 11/30. I am uncertain about the direction of the case due to the following circumstance: Deb will be receiving unemployment of \$20 per hour until next August, 2018 and she is unwilling to accept a job earning less than that. I discussed with Tim that the market for recreational therapists is small and Deb is applying for all available jobs but other than that we are not sure of jobs to apply to that would have earnings that will meet her needs. I am copying Tim here to see if he has spoken to Deb to see what we are going to do now. If you do call into the meeting on 12/5 Danielle I will talk to you then. Thanks.

Amy Rumrill, M.Ed., CRC  
Vocational Specialist  
330-472-9149 Phone  
1-855-643-0423 Fax

From: Danielle.Flickinger@ood.ohio.gov [mailto:Danielle.Flickinger@ood.ohio.gov]  
Sent: Monday, December 04, 2017 2:59 PM  
To: Rumrill, Amy  
Subject: RSCsecure

This message was sent securely using ZixCorp.

Good afternoon Amy,  
I hope you had a very nice weekend. I'm covering the job placement and development meetings for Tim for December. I was wondering when your next meeting with Deborah Moss is so that I may attended by phone. Please let me know as soon as possible so I can place it on my calendar. Please provide a phone number where you can be reached for the meeting.  
Best,

Danielle Flickinger

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Caseload Assistant  
Opportunities for Ohioans with Disabilities  
234-206-4196  
161 South High Street # 103  
Akron, OH 44308

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This message w

### 3. Activities Provided

---

No items selected

---

### 1. General

---

**Entry Date** 12/05/2017

Participant Report

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Author** Sullivan, Tim  
**Category** Phone Call  
**Share Note** No

**2. Note**

**Summary** TC to Deb

TC to Deb to discuss her Job Search and to touch base with her on how she and the Job Developer are getting along.

VRC and consumer had conversation regarding her unemployment and job search. Deb is earning nearly what she was getting paid when working for Parma Gen. Hosp. The unemployment benefits will not expire until next Sept. She will also have healthcare at no cost until then as well. Deb lives in a rural area that does not really have transportation to areas that would have a job that pays in this range. As a result, Deb shared she will not take a job that does not pay at least what she was being paid on unemployment which is in the \$20.00/hour range. Her wage at Parma was \$26.20 per hour. Deb also shared she wanted to work only part-time which further limits her opportunities. Consequently, we will close her case as this counselor feels this is not a wise use of resources. She asked if she could call us back and this counselor shared she could but she would have to be prepared to accept an appropriate job with likely a reduced wage based on her location. She was also encouraged to make sure she practices with her computer to retain her computer skills in preparation for her job search next Summer/Fall.

**3. Activities Provided**

Contact with Consumer

**1. General**

**Entry Date** 12/05/2017  
**Author** Sullivan, Tim  
**Category** Phone Call  
**Share Note** No

**2. Note**

**Summary** TC to Job Developer

TC to Amy sharing what we had discussed and what Bed wanted to do - Amy also was in



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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

agreement to close her case now as she has not been open to any job offers for less than \$20.00 per hour. Amy shared they had found nothing even close. even looking outside of her local area they had not found anything in that pay range.

She was instructed to cancel her appointment for later this afternoon.

Amy shared she will have a Closure report to me this afternoon.

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 12/05/2017  
**Author** Sullivan, Tim  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	Closure w/o Employment Outcome	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 12/05/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

**2. Note**

**Summary** RE: RSCsecure  
 From: Rumrill, Amy [Amy.Rumrill@VocWorks.com]



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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

Sent: 12/5/2017 11:12 AM

To: Flickinger, Danielle

Cc: Sullivan, Timothy

This message was sent securely using ZixCorp. < <http://www.zixcorp.com/get-started/>>

Danielle Tim is going to close Deb Moss' case today so we won't be meeting so you don't need to call me at 12:30 since I won't be meeting her. Thanks.

Amy Rumrill, M.Ed., CRC

Vocational Specialist

330-472-9149 Phone

1-855-643-0423 Fax

From: Danielle.Flickinger@ood.ohio.gov [mailto:Danielle.Flickinger@ood.ohio.gov]

Sent: Tuesday, December 05, 2017 8:06 AM

To: Rumrill, Amy

Subject: RE: RSCsecure

This message was sent securely using ZixCorp. < <http://www.zixcorp.com/get-started/>>

Good morning Amy,

I hope you had a nice evening. I placed the meeting on my calendar for today at 12:30 PM. Talk to you then.

Best,

Danielle

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

From: Rumrill, Amy [mailto:Amy.Rumrill@VocWorks.com]  
Sent: Monday, December 04, 2017 7:17 PM  
To: Flickinger, Danielle < Danielle.Flickinger@ood.ohio.gov <mailto:Danielle.Flickinger@ood.ohio.gov> >  
Cc: Sullivan, Timothy < Timothy.Sullivan@ood.ohio.gov <mailto:Timothy.Sullivan@ood.ohio.gov> >  
Subject: RE: RSCsecure

This message was sent securely using ZixCorp. < <http://www.zixcorp.com/get-started/>>

Danielle, my next meeting with Deb Moss is on Tues 12/5 at 12:30 p.m. If you would like to call in, my number is 330-472-9149. I spoke with Tim about this case on 11/30. I am uncertain about the direction of the case due to the following circumstance: Deb will be receiving unemployment of \$20 per hour until next August, 2018 and she is unwilling to accept a job earning less than that. I discussed with Tim that the market for recreational therapists is small and Deb is applying for all available jobs but other than that we are not sure of jobs to apply to that would have earnings that will meet her needs. I am copying Tim here to see if he has spoken to Deb to see what we are going to do now. If you do call into the meeting on 12/5 Danielle I will talk to you then. Thanks.

Amy Rumrill, M.Ed., CRC

Vocational Specialist

330-472-9149 Phone

1-855-643-0423 Fax

From: Danielle.Flickinger@ood.ohio.gov <mailto:Danielle.Flickinger@ood.ohio.gov>  
[mailto:Danielle.Flickinger@ood.ohio.gov]  
Sent: Monday, December 04, 2017 2:59 PM  
To: Rumrill, Amy  
Subject: RSCsecure

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**Opportunities for Ohioans with Disabilities**

**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

This message was sent securely using ZixCorp. < <http://www.zixcorp.com/get-started/>>

Good afternoon Amy,

I hope you had a very nice weekend. I'm covering the job placement and development meetings for Tim for December. I was wondering when your next meeting with Deborah Moss is so that I may attend by phone. Please let me know as soon as possible so I can place it on my calendar. Please provide a phone number where you can be reached for the meeting.

Best,

Danielle Flickinger

Caseload Assistant

Opportunities for Ohioans with Disabilities

234-206-4196

161 South High Street # 103

Akron, OH 44308

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**Opportunities for Ohioans with Disabilities**

**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

have received this communication in error, please notify the sender at the reply e-mail address and delete it from your system without copying or forwarding it. If you are not the intended recipient, you are hereby notified that any retention, distribution, or dissemination of this information is strictly prohibited. Thank you.

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### 3. Activities Provided

No items selected

---

### 1. General

**Entry Date** 12/05/2017  
**Author** Sullivan, Tim  
**Category** E-Mail  
**Share Note** No

---

### 2. Note

**Summary** RE: DM  
**From:** Rumrill, Amy [Amy.Rumrill@VocWorks.com]  
**Sent:** 12/5/2017 11:19 AM  
**To:** Sullivan, Timothy

This message was sent securely using ZixCorp. < <http://www.zixcorp.com/get-started/> >

Tim see attached closure report.

Amy Rumrill, M.Ed., CRC

Vocational Specialist

---

Participant Report

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Printed 01/18/2019

Moss Production 000873

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**Opportunities for Ohioans with Disabilities**

**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

330-472-9149 Phone

1-855-643-0423 Fax

From: Timothy.Sullivan@ood.ohio.gov [mailto:Timothy.Sullivan@ood.ohio.gov]  
Sent: Tuesday, December 05, 2017 11:08 AM  
To: Rumrill, Amy  
Subject: DM

This message was sent securely using ZixCorp. < <http://www.zixcorp.com/get-started/>>

Hello,

I just spoke to DM again and she reports she is going to not take any job that will pay her less than the Parma / Unemployment Rate is paying her. At this point it is not feasible to look only for jobs paying that rate and I don't think it is a wise expenditure of resources. Consequently, we will close her case until June-July and then likely reopen her case if she is not working.

Thanks for alerting me to the situation...

Tim

Vocational Counselor for the Akron Office of OOD

330/641-4089

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**Opportunities for Ohioans with Disabilities**

**Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

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### **3. Activities Provided**

No items selected

---

### **1. General**

---

**Entry Date** 12/06/2017  
**Author** Grair, Marcia  
**Category** Correspondence  
**Share Note** No



**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**2. Note**

<b>Summary</b>	BILLING NOTIFICATION 2068084	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 12/06/2017  
**Author** Grair, Marcia  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	BILLING NOTIFICATION 2068093	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 12/20/2017  
**Author** Grair, Marcia  
**Category** Correspondence  
**Share Note** No

**2. Note**

<b>Summary</b>	BILLING NOTICE 2068093	<b>Generated Letter</b>	Yes
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**3. Activities Provided**

No items selected

**\*\*\*CONFIDENTIAL FOR AGENCY USE ONLY\*\*\*****Opportunities for Ohioans with Disabilities****Case Notes**

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**1. General**

**Entry Date** 12/22/2017  
**Author** Pruchniewicz, Allison  
**Category** Report - Job Search  
**Share Note** No

**2. Note**

**Summary** Moss Tier I Oct/Nov 2068093 12-22-17

From: Banks, Angela [mailto:Angela.Banks@CareWorks.com]  
 Sent: Friday, December 22, 2017 11:07 AM  
 To: OOD NE Invoicing Fax <OOD.NEInvoicingFax@ood.ohio.gov>  
 Subject: Moss Tier I Oct/Nov 2068093 12-22-17

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 01/17/2018  
**Author** Grair, Marcia  
**Category** Correspondence  
**Share Note** No

**2. Note**

**Summary** BILLING NOTICE 2077978 **Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

Participant Report

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Printed 01/18/2019

Moss Production 000877

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**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
 BSVI 1

**Participant ID** 109128

**Entry Date** 03/05/2018

**Author** Grair, Marcia

**Category** Correspondence

**Share Note** No

**2. Note**

**Summary** POST 90-DAY INVOICE LETTER 2077978

**Generated Letter** Yes

**3. Activities Provided**

No items selected

**1. General**

**Entry Date** 01/15/2019

**Author** Osborne, Daniel

**Category** E-Mail

**Share Note** No

**2. Note**

**Summary** Case information request

From: Johnson, Shannon

Sent: 1/15/2019 10:22 AM

To: Osborne, Daniel

Hello, please read below.

Thank you!

Shannon Johnson, AP1  
 Opportunities for Ohioans with Disabilities  
 14650 Detroit Ave., Suite 200  
 Lakewood, Ohio 44107  
 216-227-3250  
 Shannon.Johnson@ood.ohio.gov

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Opportunities for Ohioans with Disabilities

Case Notes

**Participant** Moss, Deborah (Debra) A.  
**Caseload** VI-AKR1-3 - Vacant, Akron  
BSVI 1

**Participant ID** 109128

---

-----Original Message-----

From: Debbie Moss [mailto:dabmoss@aol.com]

Sent: Monday, January 14, 2019 4:19 PM

To: OOD NE Medical Fax <ood.NEMedicalFax@ood.ohio.gov> ; ewhite@dannlaw.com

Subject:

Hello

I am writing to request my closed file be faxed to

Emily White (lawyer)  
216-373-0536

This matter is urgent as I am in the process of litigation against my former employer and their lawyers are requesting information.

I only need file from JAN. 2015 to present which my case was closed maybe in April of 2018 or earlier.

I had sent an email to Tim Sullivan on Monday, January 7, 2018 not realizing he is no longer employed with OOD.

My phone (home) 330-225-9597  
email daabmoss@aol.com

Thank you for your cooperation in this urgent matter.  
Deborah Moss

### 3. Activities Provided

---

No items selected

---



P.O. Box 182848  
Columbus, Ohio 43218-2848

## Exit-Closure Report

**To:** Tim Sullivan, OOD

**From:** Amy Rumrill, Vocational Specialist  
**Telephone:** 330-472-9149

**Date:** 12/5/17

**Consumer Name:** Deborah Moss

**Date of Referral:** 9/28/17

**Services Provided:** Job  
Development/Placement

### Return to Work Status (check all that apply)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> RTW                      | <input type="checkbox"/> Authorized Service Completed  | <input type="checkbox"/> Skills Training       |
| <input type="checkbox"/> No Contact From Consumer | <input type="checkbox"/> Medical/Psychological<br>Instability  | <input type="checkbox"/> Transfer Other Vendor |
| <input type="checkbox"/> No Current Authorization | <input checked="" type="checkbox"/> Other Consumer and VRC agreed about case closure today since consumer will be receiving unemployment benefits until August, 2018. When she looks for a job she will need to make at least what she is earning on these benefits. This will be difficult to do unless she secures a job as a recreational therapist. Recreational therapist jobs are not abundant in the labor market and especially in the county that she lives in. Consumer needs to work in Medina county only due to transportation. |  |

### Additional Comments/Recommendations:

Thank you for this referral. Please let me know if additional services are needed in the future.

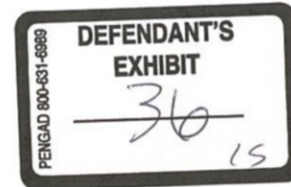




Sent regular USPS mail and certified mail

January 18, 2018

Ms. Deborah Moss  
63 Salem Court.  
Hinckley, OH 44233



**Re: Employment Status**

Dear Deborah:

This is a follow up to our phone conversation this week and of the letter dated September 6, 2017 regarding your employment status.

The letter dated September 6, 2017 summarized our concerns regarding your ability to safely perform your job, your leave status, the exhaustion of your paid time off (PTO), our encouragement for you to seek other positions within UH and to utilize the services of UH Pathways Coach, Faye Naftzger, as well as notification that your leave status would end December 31, 2017.

As you have not secured another position within UH and you have confirmed to me that you have not applied for other jobs in the healthcare system, this confirms we have processed the termination of your employment effective January 1, 2018.

Per our conversation, you indicated that you had personally owned software at Parma Medical Center and I have advised Kathryn Holley, Manager, to contact you regarding this.

If you have further questions or concerns, please don't hesitate to contact me.

Sincerely,

A handwritten signature in blue ink that reads 'Deborah Sheldon'.

Deborah Sheldon  
HR Generalist  
University Hospitals Parma Medical Center  
440-743-4052  
[Deborah.sheldon@uhhospitals.org](mailto:Deborah.sheldon@uhhospitals.org)

Cc: Kathryn Holley, Manager, PMC Hanna Pavilion  
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